

THE HORRORS OF

VACCINATION AND INOCULATION

AT WORK

**THE HORRORS OF
VACCINATION AND INOCULATION
AT WORK**

**Published by
Chiropractors' Constitutional Rights
Committee**

1 9 4 1

**Dr. Vera L. Young, Committee Chairman
604 Joplin National Bank Bldg.
Joplin, Missouri**

Copyright

1941

International Basic Technique
Research Institute, Inc.

ACKNOWLEDGEMENTS

The sponsors of this book take opportunity here to gratefully acknowledge the generous aid rendered in its compilation by the persons and organizations listed here, and to any and all others, mention of whom may have been inadvertently omitted:

The Citizens' Medical Reference Bureau, New York City; H. B. Anderson, Sec.,
Author of "The Facts Against Compulsory Vaccination"
Anti-Vivisection Association of Oregon, Inc., Portland
American Medical Liberty League, Chicago, Illinois
Committee for Medical Freedom, Boston, Massachusetts
Maryland Anti-Vivisection Society, Baltimore
Vivisection Investigation League, Inc., New York City
H. B. Bradford, Author of "Is Vaccination Worth the Risk?"
Chas. M. Higgins, Author of "Open Your Eyes Wide" and "The Case Against
Compulsory Vaccination" and "The Horrors of Vaccination"
New York Anti-Vivisection Society
National Anti-Vaccination League, London
Citizens' Committee Opposing Compulsory Vaccination, Boston, Massachusetts
The Journal of the American Medical Association, and the various State Journals
"Quest" Magazine, and the late Louis D. Siegfried
"Science Sidelights" Magazine, New York City
The "Truth Teller" Magazine, Battle Creek, Michigan
The "Masonic Observer", Minneapolis, Minnesota
"Hygeia" Magazine, Chicago
John Hayden in "Physical Culture" Magazine
The "Vaccination Inquirer", England
Cash Asher, Author of "Your Life is in Their Hands"
Emanuel M. Josephson, Author of "Your Life is Their Toy", Chedney Press, N. Y. City
National Health Foundation, Inc., Minneapolis, Minnesota
H. Valentine Knaggs, England, Author of "The Truth About Vaccination"
Henry Lindlahr, Author of "Who Makes the Damaged Goods?"
Herbert M. Shelton in "The Golden Age"
Alfred Pulford, M. D., Toledo, Ohio
Dr. Edgar M. Crookshank, London, Author of "History & Pathology of Vaccination"
Dr. C. Killick Millard, Leicester, Eng., Author of "The Vaccination Question"
Bruce Calvert in "The Open Road"
Dr. W. J. Collins, London
James A. Loyster, Cazenovia, New York
The Encyclopaedia Britannica
The Encyclopedia Americana
The Pennsylvania State Vaccination Commission
The various Bulletins of the U. S. Bureau of Animal Industry; the Farm Bureau;
the U. S. Health Department; and the Department of Agriculture
The various State and City Health Departments

A special note of appreciation is given to Dr. R. L. Fredrich of Manhattan, Kansas, for his collection of photographs showing the horrifying effects of vaccination and inoculation.

*THE CHIROPRACTORS' CONSTITUTIONAL RIGHTS
COMMITTEE*

FOREWORD

It is the purpose of this Committee to aid in re-establishing in the United States the Constitutional Rights of every American citizen in freedom to choose whatever method or practitioner he may desire in the care of his health, and freedom to refuse any treatment or practitioner he does not desire.

This freedom was provided by our forefathers when they wrote the Bill of Rights into the Constitution, and is one of the most vital rights of any free people. That it has not been successfully guarded, against selfish interests, is a national tragedy, one which must not be permitted to continue, contrary to the Constitution of our government.

There is no more flagrant imposition upon our American freedom nor impending danger to the welfare of our people than compulsory vaccination. We have prepared this compilation of facts to aid in educating and awakening the public to the serious consequences of pollution of the human blood stream through inoculation and vaccination. . . because the vacillating compliance of some can easily lead to compulsory vaccination of all, its sole purpose being dollar profit to the few.

*The Chiropractors'
Constitutional Rights Committee*

TABLE OF CONTENTS

Foreword	Page iii
Acknowledgments	iv
Introduction	1
Origin of Vaccination	2
HOW SERUMS ARE MADE	3
How Smallpox Vaccine is Made	4
Admission of Inefficiency of Smallpox Serum	6
Foot and Mouth Disease Virus Used to Vaccinate	6
How Diphtheria Antitoxin is Made	7
Seen and Heard in a Vaccine Plant	8
Influenza Vaccine, Encyclopaedia Britannica	8
Torturing Animals to Make Anti-Rabies Virus	9
How Infantile Paralysis is Made	11
The Truth about Poliomyelitis (Infantile Paralysis)	11
THE INJURIOUS EFFECTS OF VACCINATION	13
"Do You Know--"	14
Serious Effects of Vaccination in the Body	16
Blood Pollution	18
Poem, "Inoculate--"	18
U. S. Government Figures	20
Statements of Authorities on Vaccination	22
Cancer on Increase	26
Vaccines and the Heart	28
Encephalitis (Sleeping Sickness) Follows Vaccination	29
Report of League of Nations Commission	30
Encephalitis in Holland	30
Case History of Pneumonia Serum Victim	31
The Pasteur Treatment for Hydrophobia	32
Tuberculin Tests	32
Minneapolis' Experience with Tuberculin Tests	33
Syphilis Acquired from Vaccination	34
Vaccination Means Syphilization	38
Vaccination Indicted by Medical Authorities	38
Dr. Alfred Pulford, "Vaccination and Use of Serums"	42
Anaphylactic Gangrene -- Diphtheria Antitoxin	43
Dangers from Diphtheria Antitoxin	46
Why I Oppose Inoculation Against Diphtheria (Sibly)	46
Admitted Dangers from Horse Serum (Dr. A. E. Bennett)	48
Diphtheria Toxin-Antitoxin	50
Foot and Mouth Disease	52
Tetanus (Lockjaw)	54
Child Dies from Lockjaw Following Vaccination	54
Vaccination Tetanus Fatal to Two Children	54
For Those Who Doubt that Vaccination Causes Death	56
Fatal Serum Reaction	56

Infantile Paralysis Serum	58
Case of Marvin Zanger	58
Physicians Say--	62
Dr. Alfred Pulford on Vaccination	64
Death by the Serum Route	66
Vaccine More Dangerous than Smallpox	68
The Loyster Case	70
What Do Medical Men Say Vaccination Is?	72
What are the Effects of Cowpox and Vaccination?	72
Does Vaccination Afford Any Protection?	72
Does Re-Vaccination Protect?	74
Does Vaccination Mitigate?	76
What Does Vaccination Do?	76
Are the un-Vaccinated a Danger to the Community?	78
Does Vaccination Convey Loathsome Diseases?	78
Is Vaccination Harmless and Benign	78
Is Vaccination of Any Use Whatever?	80
Radio Debate on Vaccination	80
 THE INEFFECTIVENESS OF VACCINATION AS A "PREVENTIVE"	 85
Vaccination and Inoculation Do Not Prevent Disease	86
From the Records	86
State House Hearing, Massachusetts	87
Vaccinated Persons Acquire Smallpox More Readily	87
Vaccinated Patients Ill with Smallpox	87
Hospitalization for Vaccination	88
Natural Immunity Protects	88
Sanitation a Vital Factor	88
Smallpox in the Philippines	89
Vaccination Ineffective	90
Reprint from Letter in New York Medical Week	92
Influenza Serum Unsuccessful	92
Infantile Paralysis Serum	94
Decline of Typhoid in the Army	96
Typhoid Fever Treatment	96
Information for Doctors Only	97
Statements of Medical Authorities	97
 UNRELIABILITY OF PUBLISHED VACCINATION STATISTICS	 99
Medical Statistics on Vaccination Unreliable	100
Facts Omitted from Statistics (H. B. Bradford)	101
False Claims	103
 THE COMMERCIAL FORCES BEHIND VACCINATION	 105
Vaccination Enforcement (John P. Koehler)	106
Fees from Vaccination	107
Public Organizations Mediums of Promotion	109

Medical Control of Health Programs	109
Motivating Force Behind Vaccination (Bruce Calvert)	110
Serum Manufacturers' Profits	110
Doctors in the Pay of Serum Manufacturers	111
Health Department Nets Thousands from Serum Sales	111
Smallpox Epidemics	112
Fake Epidemics	112
The Rabies Racket	112
Mad Dog Scares	113
Profits from Rabies Vaccinations	113
Control of Health	114
What Would Happen if Health Boards Gave People the Facts?	115
The Medical Octopus	117
Charity Funds for Medical Propaganda (Gardner)	118
Commercialized "Philanthropy"	120
 LEGAL STATUS IN VARIOUS NATIONS	 123
Vaccination Records in Various Countries	125
Mexico	125
England	125
Japan	125
Holland	125
Australia	125
Scotland	126
Russia	126
United States	126
 OUR CONSTITUTIONAL RIGHTS	 127
Constitutional Rights	128
Compulsory Vaccination is un-American	128
Typical Attempts to Withhold Education, Employment	
or Food as a Means of Forcing Vaccination	130
"Be Vaccinated or Get Fired"	130
The Childs Case	131
Public Schools	132
The Red Cross	133
Court Decisions Rendered	133
New York Supreme Court	133
New York Appellate Court	133
Supreme Court of Columbia County, New York	133
Supreme Court of Massachusetts	134
Authorities' Opinions on Constitutional Rights	134
The Marsh Case	136
The New Emancipation Declaration	140
 THE THEORY OF VACCINATION, INOCULATION, IMMUNIZATION AND	
NEGATIVE RESULTS	141
 A NORMAL BODY IS THE GREATEST PROTECTION AGAINST DISEASE	 147

LIST OF ILLUSTRATIONS

	Page
Case of Henry Plant (Loss of arm)	15
Lymphatic Involvement as a Result of Vaccination	17
Vaccination on the Tenth Day (Septicemia)	19
Case of Edward Johnson (Typhoid meningitis)	21
The Marsh Girl (blinded by vaccination)	23
Case of Mrs. Helen Coates	25
The Crime of Vaccination, Case of Wm. Hamilton	27
Case of English Baby, Killed by Vaccination	35
Multiple Vaccinations Spread by Fingernails	37
Case of Cowpox in a Woman	39
Death from Diphtheria Antitoxin, Illustration A	44
Illustration B	45
Illustration C	47
Illustration D	49
Foot and Mouth Disease in a Vaccinated Man	51
Case of Mr. Charles Engle (Paralysis)	53
Case of Frederick Stinefoot (Death from tetanus)	55
Case of James Louis Murray (Death from tetanus)	57
Case of Belle Hinman (Cerebrospinal meningitis)	59
Case of Wilbur Doyle (Infantile paralysis)	61
Case of Mary Louise Thoma (Infantile paralysis)	63
Case of Willi Lutterloh (Death from vaccination)	65
Case of Frederick W. Bohmwetch (Tetanus)	67
The Loyster Case (Infantile paralysis)	69
Case of Arthur Smith, Jr. (Foot and mouth disease)	71
Case of Benjamin F. Olewine (Sarcoma - tumor)	73
Case of Reginald Sidney Sumsion (Tetanus)	75
Case of Sergeant H. Nichols (Anti-typhoid inoculation)	77
Case of Oliver Cramer (Tetanus)	79
Case of Sybil Knouf (Pneumonia serum)	91
Case of Ivon Coonrod (Diphtheria antitoxin and snallpox vaccination; death from tuberculosis)	93
Case of Ruth A. Minnick (Infantile paralysis)	95
U. S. Vaccination Map	124
The Childs Case	131
The Marsh Case	136
Case of J. T. Morgan	149

INTRODUCTION

The world famous Dr. Hermann of Vienna once said:
"The world resents nothing so deeply and punishes nothing so harshly as the uprooting of dear old superstitions."

We can understand this in the average human being who does not profess to be a student or a trained thinker. But this pronounced tendency in the orthodox medical profession, which lays claim to deep scientific background, is not so easily justifiable. Certainly no other science clings so tenaciously to old and unproved theories as does the medical profession.

It would seem that when Pasteur hit upon the germ theory, the medical profession "closed the books" and ceased to search further for the cause of human ailments. All efforts since have been directed toward the finding of a germ for every disease, and a drug or serum to combat the germ. All their "scientific research" is centered upon the germ theory and no amount of proven facts contradictory thereto are given the slightest consideration.

This same closed-minded attitude is maintained on the subject of vaccination and inoculation by the majority of the profession. The medical fraternity has to admit that it has never kept a life history on a single case of vaccination to see what dangerous after-effects through life may ensue. Yet there is a decided tendency to attempt to force these practices upon people by law under the guise of "public health programs".

Naturally any intelligent person resents such un-American tactics. Just as he values his right to worship as he chooses, his right to free speech, so he values his right to choose the methods and measures he employs in the care of his physical health.

ORIGIN OF VACCINATION

To Edward Jenner, a native of Gloucestershire, England, is attributed the origin of the practice of vaccination. At that time there was a superstition among dairy maids that anyone who had had cowpox would never have smallpox. "Cowpox consisted in an eruption which now and then appeared on cows' udders at certain seasons and was rubbed by ignorant milkers into huge sores. When the milkers' hands were poisoned by the exudation from these sores, large blisters and ugly inflamed swellings and abscesses frequently resulted. This condition, known as cowpox, bore no more likeness to smallpox than the moon does to cream cheese." (From Dr. Walter H. Hadwin of Gloucester, noted authority on smallpox of that day.)

No bull ever had cowpox, nor any cow that had not been milked. It developed by the dirty or diseased hands of a milker on the teats of a milch cow. *Its character was parallel with syphilis.*

Jenner who at the age of 16 was apprenticed to a surgeon and apothecary by the name of Ludlow for a period of five years, never passed a medical examination in his life. In 1792, after he had practiced for twenty years, he bought his medical diploma for the modest sum of 15 pounds. His first paper dealing with the Causes and Effects of Inoculation with cowpox was published in 1798. Later he developed what was known as horse-grease cowpox, of which a contemporary Dr. Squirrel said:

"On reading of Dr. Jenner's account of the origin of cowpox (from horse-grease), I was struck with such horror and aversion that I could not, as man of honor or telling, submit it or coincide with vaccination. What in the name of God could have induced him to have introduced a disease of so filthy a nature, and apparently, according to his own account, such a dangerous tendency? I should have imagined that his own description would have furnished him with the most powerful argument against it."

Jenner inoculated his son, Edward, when a year and a half old with swine pox, and later the rest of his family, and they all died of tuberculosis.

A most ghastly history has followed Jenner's "wonderful discovery." In the 9th edition of Encyclopaedia Britannica we find that in 1870, 1,422 children under one year of age were killed by vaccinal syphilis in England and Wales; in 1880, 1,588 met the same fate in these same countries. In 1884, the number was 1,733! In 1907 England, the home of vaccination, repudiated compulsory vaccination.

At an International Congress in 1889, Dr. Gifford of France said:

"To Edward Jenner a great monument in memory has been erected, and upon its columns in the future, if not in the present, generations will inscribe: 'Accursed be the man by whose cunning device the blood of all nations has been poisoned.'"

HOW

SERUMS ARE,

MADE

HOW SMALLPOX VACCINE IS MADE

A calf is tied down to a table, and after its stomach has been shaved, from one to two hundred cuts or scratches are made in this shaven surface. Then a drop of glycerinated lymph - which is a culture of small pox obtained directly or indirectly from human smallpox and other animal infections and passed through a solution of glycerine - is dropped into these cuts and thoroughly rubbed in.

Within a short time the animal develops a high fever and becomes extremely sick. The cuts on its stomach become festering wounds which gradually fill with pus, putrid cells, and ulcerative disease. Naturally the torture which the poor creature suffers is unspeakable. About a week after the calf has been thus inoculated, it is again strapped to the table and the pus and scabs from these infected sores are carefully scraped and placed in a small crucible. To this horrible mass of putrid matter an equal measure of glycerine is added and the two are mixed thoroughly by means of a small electric motor. It is then passed through a very fine sieve in order to remove the coarse pieces of rotten flesh, hair, etc., again thoroughly mixed and placed in tubes for distribution throughout the country as pure calf lymph or smallpox vaccines. It is this rotten stuff that our health boards, school boards and family physicians insist upon injecting into the blood stream of millions of school children every year!

But this is not the worst. Dr. S. Monckton Copeman at the Victoria University of Manchester, April 25, 1904, said:

"The most satisfactory material was found to be vesicle pulp, obtained in the post mortem room from cases of discrete smallpox that had died during a comparatively early stage of the eruption." Dr. Copeman goes on to tell how, after this "pulp" has been mixed with glycerine, it is inoculated into monkeys, next into calves, and then into children.

Vaccine lymph made from vesicle pulp from sores in the body of a living patient is revoltingly unsanitary, and we hold, clearly an illegal product. But what shall be said if made from the putrid sores on a smallpox corpse?

Rewritten from:

Chas. M. Higgins' "Open Your Eyes Wide" and
Anti-Vivisection Assn. of Oregon's
"Beware! The Danger of Vaccines"

Dr. E. B. Foote of New York put it very well when he said:

"Give me liberty from pox of any kind, or give me death
from something less unclean."

Report of the Pennsylvania
State Vaccination Commission

Dr. Robert N. Willson, pro-vaccinal authority, testified before the Commission that he had made a somewhat extensive bacteriological examination of the contents of vaccine virus, and when asked to state the kinds of organisms he found in the virus, he answered (Testimony, page 2123):

"All of the pus producing organisms, the streptococcus, the staphylococcus, the pneumococcus, etc."

It might be added that Dr. Willson found the above disease germs in vaccine virus that was ready for use when acquired by him for examination.

"Since glycerinated lymph in glass tubes has been used, tetanus following vaccination has greatly increased." - John Pitcairn, member of the Pennsylvania State Vaccination Commission.

-O-

In his report Mr. Loyster, a newspaperman who made an exhaustive study of vaccination after it had resulted in the death of his son, says: "Many investigators, among whom may be mentioned Dr. Flexner, the greatest living authority on infantile paralysis, have demonstrated that glycerination, on which manufacturers depend for starving out undesirable organisms, has no neutralizing effect upon any member of a related group of filterable and ultra-microscopic germs to which belong smallpox, syphilis, infantile paralysis, hydrophobia and others of the most terrible diseases known."

Dr. Victor C. Vaughan, former President of the American Medical Association, "Epidemiology and Public Health" Volume I, 1922:

"Usually, practically all bacteria disappear from the glycerinated preparation within a month. However, in all instances white mice should be inoculated in order to prove the absence of the tetanus bacillus."

"Bacteria in Vaccine", Encyclopedia Americana, Vol. 27:

"All vaccine virus contains many varieties of bacteria, some of these may be pathogenic, but the majority are harmless."

Dr. William Brady, in Ohio State Journal, Columbus, Ohio, October 21, 1923:

"Nobody has isolated a specific germ or organism from the virus employed for vaccination. No one can be absolutely certain that the virus employed for vaccination will not convey to the subject vaccinated some accidental infection as well as vaccinia."

ADMISSION OF INEFFICIENCY OF SMALLPOX SERUM

In The Evening Star of Washington, D. C., of October 9th, 1935, there was published the greatest expose of vaccination that I have ever seen so far. The heading read: "Giving Smallpox to Test Tube Develops Cleaner Type Vaccine." There follows:

"Milwaukee, Oct. 9 - Four thousand who escaped scars by a new kind of smallpox vaccine were cited as reasons for the health officials to reconsider the entire smallpox vaccination technique. The object is to introduce wholesale tests of a new and cleaner type of vaccine. It has been developed the last three years at the Rockefeller Institute, New York. * * * It is made by giving smallpox to a laboratory test tube instead of to a calf. The important difference is complete freedom of contamination in the tube - but never in the calf. The vaccine obtained from the tube is free from the foreign and troublesome impurities that are inseparable from the calf vaccine. So pure is this new vaccine that Dr. Rivers said it can be injected hypodermically under the skin. The ordinary calf vaccine is supposed to confer immunity for seven years. But this, Dr. Rivers said, has not been verified."

H. B. Bradford in "Is Vaccination Worth the Risk" points out that medical manufacturers and the medical profession have not waited until they had vaccine free "from foreign and troublesome impurities" before they have attempted to force compulsory vaccination upon the public. They did not admit that it was anything but "pure" nor that it "had not been verified that it did not protect for even seven years"!

He goes on to say: "'So pure is this new vaccine' - What does that mean? 'Pure' what -- smallpox pus? The only source from which to collect such filth is from the pustules of smallpox corpses, and that is just where they collect the virus for this 'pure vaccine'".

FOOT AND MOUTH DISEASE VIRUS USED TO VACCINATE

The Bureau of Animal Industry, Circular No. 147, and Farmers' Bulletin No. 666, contain proof by the United States Government that the epidemics of foot and mouth disease which swept this country in 1902-1903, 1908, and 1914, were started from vaccine virus. The same circular, No. 147, pages 24-26, states that from 1902 to 1908, and very probably to 1914, thousands of school children were vaccinated under compulsion with virus containing the germs of foot and mouth disease with a resultant debasement of the blood which may, in after years, result in complications of a very serious nature.

Professor Milton J. Rosenau, director Hygienic Laboratory, Washington, D. C., (one of the most noted bacteriologists in the United States), states in Bulletin No. 12, 1903:

"We are compelled to vaccinate our patients with a virus containing micro-organisms other than those causing vaccination.....It will be shown that there is practically no vaccine on the market free from bacterial contamination. We have found tetanus (lockjaw) spores alive and virulent on dry spots after two hundred and ninety-five days and in glycerinated virus sealed in capillary tubes after three hundred and fifty-five days."

HOW DIPHTHERIA ANTITOXIN IS MADE

A specimen is taken of the excretion from the throat of a patient suffering from diphtheria. Care must be taken that this excretion contain the diphtheria bacillus, for many diphtheric throats contain no diphtheria bacillus at all.

This specimen is placed in a special beef broth which is kept at a certain even temperature in an incubator for ten to fourteen days, until the germs multiply a millionfold and the broth becomes alive with them. It is recommended that the meat used for making the broth should be kept for some days or until it has begun to putrify. The broth is then filtered and is then ready to be injected into horses.

To begin with only a few drops are injected under the skin of the horse. These injections are made twice a week in gradually increasing doses over a period of five or six months until the dose becomes as much as a pint to a pint and a half.

At first these injections produce a great deal of constitutional disturbance - as we would expect such a blood-poisoning to do. The animal becomes feverish, goes off its food, it may have diarrhea and shivering fits. But the injections are continued until the animal - if it does not die - ceases to show any reaction whatsoever. It is then said to be "immune" and its blood is supposed to contain an antitoxin capable of neutralizing the toxin or poison of diphtheria.

Ordinarily, the third day after the last injection of poisoned beef broth the bleeding process begins. To do this the animal's head is firmly fastened and a long sharp pointed tube is driven into his neck over a large blood vessel. Through this tube from two to three gallons of blood are drawn from the animal and placed in a receptacle. The blood coagulates and the clear fluid which rises to the surface--called serum--is put into tubes and sold at high prices under the name of DIPHTHERIA ANTITOXIN. This process is repeated from time to time until the animal is exhausted or dies.

Even in the horror of the thought of injecting such poisonous matter into the blood stream of men, women and children, most of us are sufficiently humane to exclaim "What about the horses"? This continuous poisoning and loss of blood produce a torturing, lingering death. Their organs often become so friable that they literally break to pieces and death is apt to occur from rupture and hemorrhage. And this is the way that modern medicine man is permitted by the government of a "Christian country" to torture an animal!

Here is a sworn statement by the New York Anti-Vivisection Society from a former employee of the Rockefeller Institute:

"If Dr. Jobling or Dr. Flexner came near the horses they would prick up their ears and move back and forth and seem to be afraid of them. They used the twitch, which is a cruel thing they used on the upper lip to keep them still. Horses would rather stand the bleeding patiently than have the twitch.

"Horses suffered a great deal after the inoculations. First the horse was inoculated; two weeks later he was bled; two weeks after this he was again inoculated. Then it would swell on the shoulder where he had been inoculated, and a lump would form, and the swelling would subside; afterwards the lump would burst, and then there would be an open ulcer with the pus running down in a steady stream all the time for about a week. That occurs with every horse they inoculated for serum.

"The horses were in such pain that they would stand for hours without moving, and when they did move they would utter sounds I cannot describe; I can hear them yet; I can never forget them; they were indescribable."

(Oregon Anti-Vivisection Assn.,
"BEWARE! The Dangers of Vaccination")

SEEN AND HEARD IN A VACCINE PLANT

by Lora C. Little (exerpt)

"We also witnessed and heard of antitoxin production - not here to be described; saw the stable full of big horses, some weakly tottering and evidently approaching their end. They purchase broken-down draft horses, the larger the better, as they can furnish more blood than smaller animals. We saw one of the noble creatures in a room waiting to be bled, and plainly trembling in anticipation. He had been drenched with an antiseptic bath. The operator plunged a sharp steel instrument into his jugular vein, and the horse jumped and cringed. A tube was placed over the wound and the blood flowed through it into a glass jar. The horses are first infected repeatedly with diphtheria cultures. They die in time from this abuse.

"No lover of horses but must have his heart wrung when he visits this department. The whole place became eloquent of torture; disease, disease everywhere, the silent suffering of the patient brutes, the shallow, calloused wretches who were tormenting them, the doomed human victims over the country to be tainted and killed as the result of these superstitious cruelties - these were the images and reflections that occupied my mind."

"The Hell of Vivisection" -- Anti-Vivisection
Association of Oregon, Inc.

No vaccine can be entirely satisfactory unless it is known to contain the virus or germ of the disease in question. The vaccine issued by the War Office, and afterwards by the Ministry of Health, was confessedly of a provisional nature since the causative agent was still uncertain. Its formula was as follows:

	Per Cu. Cm. of Vaccine:
Bacilli influenzae (Pfeiffer	400,000,000
Pneumococci	200,000,000
Streptococci	60,000,000

"Influenza" -- Encyclopedia Britannica
Vol. 12, page 349

TORTURING ANIMALS TO MAKE ANTI-RABIES VIRUS

(The account of an eye-witness, Mr. Herbert J. Reid, F. S. A., F. R. S. I. (London), who visited the Institute Pasteur, February 22 and 23, 1894).

"Upon an ordinary deal table stands a board, with four iron eyelets affixed, one at each corner. Upon the board is placed the healthy rabbit, held by Jupille. Four leather thongs are produced, and slip-knots being made, they are passed over the fore and hind legs of the trembling animal. No anaesthetic is given. The unfortunate creature, being now completely bound and helpless, is ready for trepanning.

"The assistant holds the head, the operator uses a pair of sharp, surgical scissors, with curved blades, and clips off all fur from the head, which is then moistened with an antiseptic solution. He next makes an incision about $\frac{3}{4}$ to 1 inch in length, laying bare the skull. A little instrument is then inserted, which serves the purpose of keeping the skin of the rabbit recently cut, open, and facilitates the coming operation. The wretched creature's skull is now completely bare, and the operator produces his trephine, an instrument used to cut out a circular portion of the skull. It is worked by a little handle at the side, this movement acting upon a circular saw at the base, and some 30 revolutions are sufficient to pierce the bone.

"When this has been affected, the piece of bone, about $\frac{1}{4}$ inch in diameter, is removed with a small instrument, and the animal's brain is exposed to view. The prepared virus is then injected into the brain; a couple of stitches put through the skin closes the wound, and the rabbit is then removed to its pen, there to linger in incalculable suffering for ten days, dying slowly of artificially induced paralytic rabies. When it is dead its spinal marrow will in turn serve to inoculate other healthy rabbits, and thus the succession of virus is secured, as also the continuity of daily suffering and torture for the victims.

"When I remarked the absence of chloroform, I was told it was used when necessary for dogs, but never for rabbits, as its effects would be more painful and injurious to the rabbit than the actual operation of trepanning. The conclusion is this - the rabbit is weakly and can offer but little resistance; moreover, it is not accustomed to bite.

"The wretched animals I saw inoculated on Friday are today lying on their sides in their pens, slowly dying of paralytic rabies, their hind legs extended and powerless, but their eyes turned pleadingly towards the visitor. On Monday next they will have ceased to suffer. Their spinal marrow will on that day be ripe for use for the maintenance and succession of rabic virus inoculation.

"The virus is prepared in the following manner: In a metal trough a rabbit, dead at the tenth day from inoculation, is extended. With a keen blade the skin is carefully cut open from the head the length of the body. Next the skin is partially removed, exposing the flesh,

which, in its turn, is carefully cut off, exposing the spine. This operation is most carefully performed, as is also the subsequent one of opening the backbone to expose the spinal marrow.

"After this the spinal marrow is removed, usually in three large portions, and, affixed to a piece of thread, is suspended in a large phial, at the bottom of which is caustic potash, which absorbs all moisture. The phials are then removed to a dark room, heated to 23 degrees Centigrade, and the contents are used the next day for preparing the fluid to be inoculated into human beings.

"The next operation is to remove the rabbit's congested brain, which is taken into a dark room, placed in a phial, and with a small quantity of very weak sterilized veal broth, is triturated; it is then forthwith injected into a healthy rabbit's brain, after trepanation, as already described."

-O-

Relating before the City Council of Portland, Oregon, March 15, 1935, the above cruel method of manufacturing anti-rabies virus, Mrs. Gladys L. Woodbury, secretary of the Anti-Vivisection Association of Oregon, turned to Dr. W. H. Lytle, Oregon State Veterinarian, and inquired: "Isn't that true, Dr. Lytle?" His reply was: "Yes, - for the inoculation of humans. For dogs, goats are used."

Dogs themselves have countless times been subjected to the above processes in connection with rabies experiments and anti-rabies serum manufacture. Pasteur said of these dogs: "Their tortures are intense."

--O--

Does it not sound like witchcraft? The public's part in this "rite" would seem to be the guinea pig.

This is the "treatment" to which we are urged to submit on the cry of MAD DOG in the community. This "treatment" consists of a series of 14 to 21 injections, at a cost determined by the attending physician, and which may amount to \$50. In cases where we are assured that the "victims" were treated *free* by the board of health, it is still at *YOUR* expense.

Anti-Vivisection Association of Oregon, Inc.
 "High-Lights on the Rabies Racket"

HOW INFANTILE PARALYSIS SERUM IS MADE

From the News-Week of July 20:

"In New York Drs. Park and Brodie put in an order for 1,500 little Rhesus monkeys from India to help make more vaccine. They already have 200 animals now in all stages of infection.

"..... Assistants shave the quaking quadrumanes' bellies and tattoo them for identification. They also make tonsures on their tiny heads; here the needle injects a deadly dose of microbes.

"Within a week the victims lose the strength of their legs and drag themselves around with their long arms. Soon after then, with death near, laboratory workers again take them from the cages. A deft lancet-stroke to the heart brings a quick end.

"Then experts cut out the diseased spinal-cords and grind them up in a strong disinfectant. The solution that results is the vaccine now being manufactured at top speed for an inevitable summer demand."

In August 448 monkeys brought from the Indian jungles to make the serum were imported into New York by the City Health Department, to Dr. Brodie's laboratory. It was expected that during September more than 3,500 additional monkeys would arrive for the same purpose.

THE TRUTH ABOUT POLIOMYELITIS (INFANTILE PARALYSIS)

From a radio talk issued by the Baltimore City Health Department:

Mr. Strong: I have heard that there is a serum which has sometimes been used for infantile paralysis. Is this true?

Dr. Ellicott: Yes. This convalescent serum used to be well thought of but it does not seem to do any good. It is obtained from the blood of persons who have had poliomyelitis. Careful studies have proven that this serum is of no benefit in treating the disease. *It may even do harm if its administration serves to bring such a sense of security that other important treatment measures are neglected.* There is practically no evidence that it is any good as a preventive either. For these reasons the serum is *no longer advocated by many health authorities.* Along this same line a new vaccine to prevent poliomyelitis has recently been prepared but convincing proof of its value has not yet been obtained. *Its use is still in the experimental stage.*

Mr. Strong: How can the Health Department check an epidemic?

THE
INJURIOUS EFFECTS
OF
VACCINATION

DO YOU KNOW —

That thousands of persons have been killed and many thousands more have been crippled and diseased for life from vaccines and serums?

That it is the estimate of independent doctors that out of every 100 persons vaccinated, 80 will require from one to scores of professional visits afterward, for all manner of disease, including syphilis?

That the nation is being induced to submit to the injection of serums by an amazingly interlocked group of organizations, which are profiting enormously at the expense of the health of the people of the nation?

That a huge propaganda machine has been organized by the H. K. Mulford Company, serum manufacturers, the network of which extends into almost every city, town and village in the United States, as well as to foreign lands? The H. K. Mulford Company has grown from a little \$125,000 business into a \$1,000,000 enterprise with branches in most countries of the world.

That serum propaganda is aided by doctors and druggists who own stock in vaccine companies?

That most vaccine companies employ high salaried "diplo-mats" to talk and lecture in order to persuade the people to use these drugs and medicines? This is done under the guise of "education".

Citizens' Medical Reference Bureau,
New York City



FIG. 14. Before Vaccination

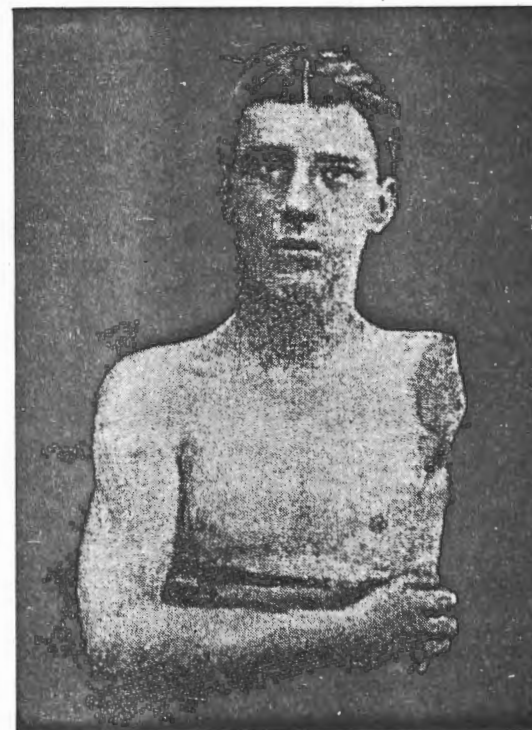


FIG. 15. After Vaccination

CASE OF HENRY PLANT

SERIOUS EFFECTS OF VACCINATION IN THE BODY

The most scientific objection to the theory and practice of vaccination and serum treatment is the harmful effect of vaccines and serums upon the lymphatic system of the body.

The injection of these poisons into the lymph causes the lymphatic glands or "nodes" to become inflamed and swollen, as shown in the illustrations following; it further results in the poisoning of the body tissues and organs.

(See illustrations, following page, by courtesy of American Medical Liberty League, Chicago, Illinois)

It is the function of the lymph nodes to manufacture white blood cells, and, insofar as is possible, these cells destroy the harmful poisonous material which enters the body. However, in extreme cases of vaccine poisoning, the nodes may become blocked and the blood permitted to absorb the toxic material, with the result that death from blood poisoning, gangrene, or other serious complications occurs.

"Hundreds of persons have died from lymphatic poisoning following vaccination. *It is a question whether severe vaccine poisoning is not more difficult to clear than venereal poisoning.* The sores following suppuration after vaccination are almost impossible to heal in some instances.

"Remember this: Six swollen lymphatic glands in certain areas will make one ill. A dozen will put you on your back. And fifty vital glands blocked may cause death . . .

"I would not be vaccinated and take the risk of complications for a \$10,000 draft on the Bank of England . . . "

Dr. F. P. Millard, Toronto

"The blood is the only healing agent in the world. The same wisdom which produced the marvelous chemistry of digestion produced the chemical composition of blood. The greater (?) wisdom of 'Medical Science' has been poisoning and polluting this vital fluid for over two hundred years. Medical science teaches that we may have *disease sown in the body, and reap health from it!* Can we ward off smallpox best when we are made sick by vaccination?"

H. B. Bradford in The Truth Teller,
October, 1939

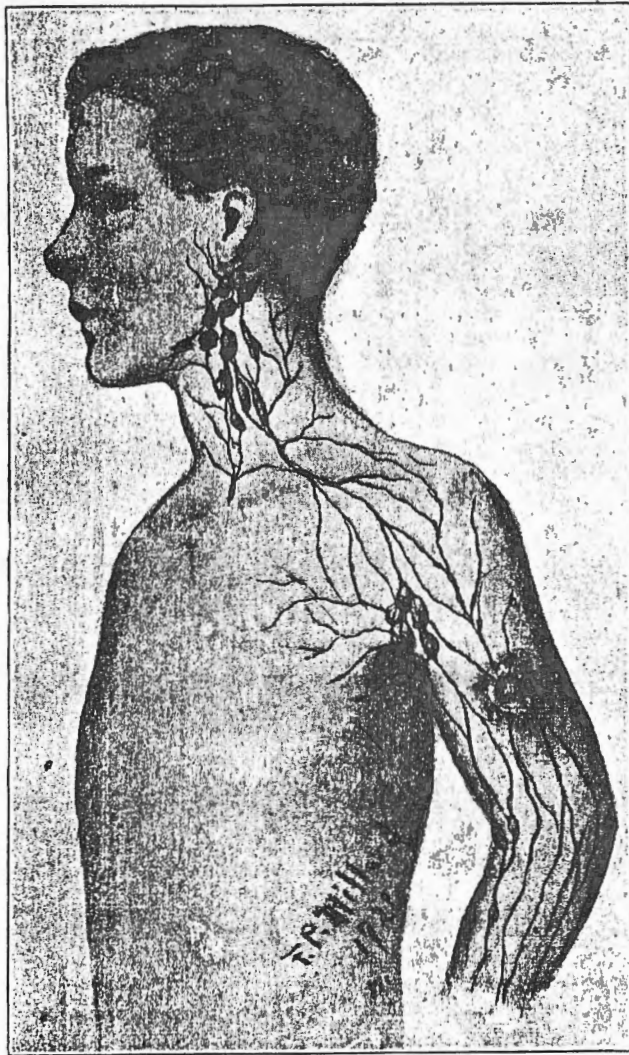


Fig. 1 Showing the lymphatic involvement in vaccination on the arm. Note the nodular enlargement of the lymphatics in the arm pit, the cervical glands of the neck and the region of the tonsils.

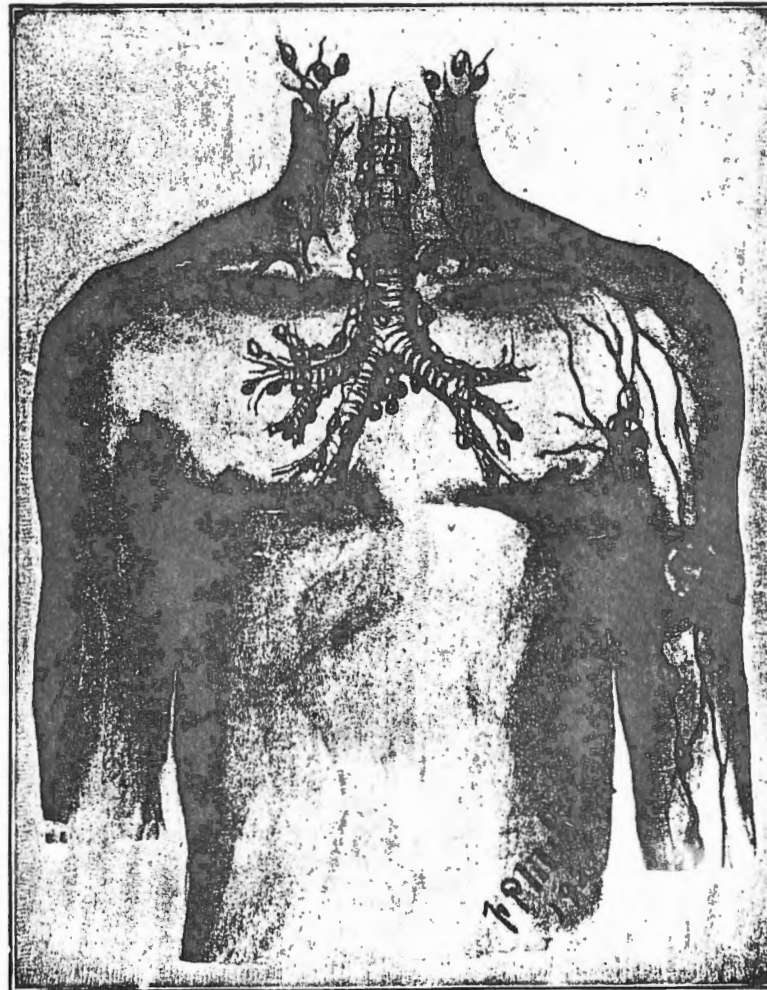


Fig. 2 Showing the enlargement of the lymphatic glands along the trachea (windpipe) and the bronchial tubes, which results from vaccination.



Fig. 3 Vaccination on the thigh commonly causes enlargement and sometimes running sores in the lymphatic glands in the groin. Sterility may result when the poisoning involves the pelvic region.

BLOOD POLLUTION

The following statement from the "Queries and Minor Notes" department of The Journal of the American Medical Association, August 10, 1940, in answer to the question, "*What routine procedure of immunization is indicated in a child according to the best present-day practice?*", brings the average reader to a startling realization of the promiscuous pollution of our children's blood recommended by the medical profession:

"Answer:

It is well to perform vaccination against smallpox within the first three months after birth. Next in order, immunization against whooping cough is advocated by many. Ordinarily this procedure is not advised prior to the second half-year of life. As a rule, when the child has reached 9 months of age it should be immunized against diphtheria. At this time the combined method of establishing immunity against diphtheria and tetanus may be adopted. Between the ages of 1 and 2 years consideration may be given to inoculation of the child with streptococcus toxin for the purpose of establishing immunity against scarlet fever. Some hesitate to resort to the last named procedure because of the possibility of severe reaction. Vaccination against smallpox should be repeated when the child enters school and again before entering college. Schick and Dick tests should be done when school age is reached in order to determine whether further immunizing substances are required."

The following poem was composed by a medical student, Winnipeg, Manitoba, Canada. The above article makes more pertinent its ironic humor:

- | | |
|---|---|
| 1) Inoculate for smallpox
Inoculate for tetanus,
For fevers, chills and other ills
That daily seem to threaten us. | 3) Inoculate for bunions
Inoculate for mumps
Inoculate for bald heads,
And eke for nervous slumps |
| 2) Inoculate with owl lymph
To stimulate the brain,
Inoculate with monkey glands
To make us young again. | 4) Inoculate for typhoid
Inoculate for spavin,
It's just as good as any way
To waft our souls to Heaven. |
| 5) But one fine day the laity
Will move in self-defense
To inoculate the doctors
With a little common sense! | |

(Text to Picture on Following Page: Vaccination on the tenth day, showing a severe type of infection in a little child. Note widespread inflammation over the arm at the "areola" around the vaccine pustule and the bad eruption on the face which sometimes spreads all over the body. This is, of course, a clear case of pus infection and septicemia in which lockjaw, meningitis, pneumonia, or other diseases may find their essential conditions for producing their deadly work in killing the child as a direct or indirect result of the vaccination and the double infection caused by it.)

HORRORS OF VACCINATION



FIG. 6. Vaccination on the tenth day, showing a severe type of infection in a little child. Note wide-spread inflammation over the arm at the "site" around the vaccine pustule and the bad eruption on the face which sometimes spreads all over the body. This is, of course, a clear case of pus infection and septicemia in which lockjaw, meningitis, pneumonia, or other diseases may find their essential conditions for producing their deadly work in killing the child as a direct or indirect result of the vaccination and the double infection caused by it.

Said Clarence Darrow, noted criminal attorney:

"If we could pick out the various things that could be injected into the human body for twenty different diseases, I would like to see how a man would look, and how long he would last if he took them all."

Copied from "Your Life is in Their Hands" by Cash Asher

THESE ARE U. S. GOVERNMENT FIGURES:

Between 1910 and 1930, in U. S. Registration Area, Population increased only 120 percent.

Deaths from heart disease *INCREASED 196 percent!*

Deaths from cancer *INCREASED 180 percent!*

Deaths from diabetes *INCREASED 180 percent!*

Deaths from influenza *INCREASED 198 percent!*

Dr. Stuart Close, a leading physician of Brooklyn, wrote:

"My experience, dealing largely as I do with chronic and constitutional diseases, shows me that vaccination is one of the most prolific causes of disease. . . . That influence of vaccination is promoting the alarming increase of cancer, tuberculosis, neurasthenia and insanity, has often been pointed out."

"The Hell of Vivisection" --
Oregon Anti-Vivisection League

HORRORS OF VACCINATION

CASE No. 18



EDWARD JOHNSON

EDWARD JOHNSON, son of J. Johnson, No. 65 South
Binghamton, N. Y.

Age 11 years 7 months.

Vaccinated Aug. 6, vaccine "E."

Commenced to complain Aug. 14,—8 days from vaccination.

Died Aug. 26.

First diagnosed "Blood Poison."

Subsequent diagnosis "Typhoid Meningitis."

Patient had been in perfect health prior to vaccination. He was ordered to hospital for an operation to which parents would not consent. There were no convulsions. He was unconscious about a week. Paralysis of throat a prominent symptom. Breathing much labored.

Both this case and No. 17 were subjects of sharp controversy among doctors and others in the city of Binghamton. There is no lack of medical opinion as to vaccination having been the primary cause of illness but this is stoutly denied by other physicians. Considered collectively with the similar cases herewith reported, it seems that there can be little doubt of their being similar to the rest of the vaccination fatalities.

STATEMENTS OF AUTHORITIES ON VACCINATION

In recent years much discussion has been centered on the advantages and on the grave dangers of vaccination. Answering the question "Who can be considered an authority on this subject?" we may well quote Hon, Arnold Lupton, who said:

"I would suggest that a real authority is a man who has devoted years of his life to the study of the vaccination question unbiased by pecuniary advantages or professional sympathy."

Among these disinterested authorities we may mention the names of men prominent in science, medicine and literature, entirely opposed to vaccination:

W. Van R. Blighton, M. D.:

"It may furnish food for candid reflection, that tuberculosis has increased 300 per cent; skin diseases 276 percent, and cancer 600 percent, since the introduction of compulsory vaccination. You cannot inject poisonous matter into the blood without corrupting it."

J. W. Hodge, M.D., Niagara Falls, N.Y., the noted anti-vaccinationist, exclaimed:

"Think of the unparalleled absurdity of deliberately infecting the organism of a healthy person, in this day of sanitary science and aseptic surgery, with the poisonous matter obtained from a sore on a diseased calf."

Walter R. Hadwen, M.D., M.R.C.S., L.R.C.P., J.P., etc., England, the indefatigable and successful opponent of inoculation and vaccination, has said:

"England appropriated 4,000,000 pounds sterling for the care of soldiers (returned invalided from the war); I have treated many such cases, and attribute their illness to the results of anti-typhoid inoculation."

Dr. J. J. G. Wilkinson, England, once a Pro-Vaccinist, was urged to investigate the whole subject, which, with reluctance, he did, then stated:

"Not denying other forms of social wickedness, I, now after careful study, regard vaccination as one of the greatest and deepest of all forms, abolishing the last hope of races, and the new born soundness of all the human family."

H. C. Chancellor, M.P., Member of the British War Ministry, 1917, stated:

"Assuming we have an army of 5,000,000 men, not less than 50,000,000 days have been wasted by incapacitating our soldiers through this inoculation process. I fear that the germ theory, even if it were exploded, will not be easily surrendered, so long as there are large establishments making a business of inoculation and finding that it pays."



The Marsh Girl

This girl and her sister, went blind after vaccination and the sister died, while this girl had the horrible experience of having her eye balls swell and burst leaving empty sockets.

Dr. Milton Ross, a scholarly student, physician and scientist, made this startling declaration:

"I should be false to the best interests of humanity did I not record my convictions, based upon irrefutable facts, that vaccination is *an unmitigated curse, and the most destructive medical delusion which has ever afflicted the human race.* I know full well that the vaccinator sows broadcast the seeds of many filth diseases of the skin, the blood, the hair, and the eyes, which are transmitted from generation to generation as ever abiding curses to humanity."

Professor Edgar M. Crookshank, Bacteriologist, King's College, England, made an independent study of vaccination. The result was the two ponderous volumes, "The History and Pathology of Vaccination," in which he denounces the practice as being uncertain, unscientific and dangerous. Quoting:

"Unfortunately a belief in the efficacy of vaccination has been so enforced in the *education of the medical practitioner* that it is hardly probable that the futility of it will be acknowledged in our generation, though nothing would redound more to the credit of the profession and give evidence of the advance made in pathology and sanitary science."

Professor Alfred Russell Wallace, England, the great scientist, after exhaustive study, prepared an essay on vaccination, "Vaccination a Delusion; its Enforcement a Crime." Before the Royal Commission, Professor Wallace testified:

"While utterly powerless for good, vaccination is a certain cause of disease and death in many cases, is the probable cause of about 10,000 deaths and annually of 5,000 inoculable diseases of the most terrible and disgusting character. . . I affirm that vaccination is *a gigantic delusion; that it has never saved a single life;* but that it has been the cause of so much disease, so many deaths, such a vast amount of utterly needless and altogether undeserved suffering that it will be classed by the coming generations among the greatest errors of an ignorant and prejudiced age, and its penal enforcement as *the foulest blot on the generally beneficent course of legislation during our century* * * *

. . . "The successive Vaccination Acts were passed by means of allegations which were wholly untrue and promises which have all been unfulfilled. They stand alone in modern legislation as a gross interference with personal liberty and the sanctity of the home; while as an attempt to cheat outraged nature and to avoid zymotic disease without getting rid of the foul conditions that produce or propagate it, the practice of vaccination is utterly opposed to the whole teaching of sanitary science, and is *one of those terrible blunders which in their far-reaching evil consequences are worse than the greatest of crimes.*"



Mrs. Helen Coates
Died, Feb. 4th, 1922

Mrs. Helen Coates of Bolivar,
Mo. was vaccinated by a nurse
and died from the effects in
less than two years time.

CANCER ON INCREASE Vaccination a Vital Contributing Cause

Dr. Adair, Chief of Clinical Services for the Memorial Hospital, New York City, chairman of the cancer committee of the American College of Surgeons, and chairman of the cancer committee of the American Medical Association, speaking of cancer, says:

"The disease appears to be increasing at the rate of 2 percent a year. Last year 150,000 persons died of cancer in the United States. At the nominal increase it is reckoned that the annual deaths by 1960 will be 270,000. In the World War this country lost 100,000 men, less lives than cancer takes every year."

Dr. Robert Bell, a pre-eminent London physician and cancer specialist for nearly fifty years, after the most careful and conscientious observation, asserts that *an important contribution to the monstrous increase in cancer has been vaccination*, the "debasing influence of the virus injections upon the system causing a tendency to development of cancer from any chance wound, bruise, or local inflammation in after years".

W. B. Clark, M.D., Indianapolis, Indiana, makes the following statement:

"Cancer was practically unknown until cowpox vaccination began to be introduced. I have had to do with at least 200 cases of cancer, and *I never saw a case of cancer in an unvaccinated person.*"

Charles E. Page, M. D., Boston, well known Progressivist, asserts:

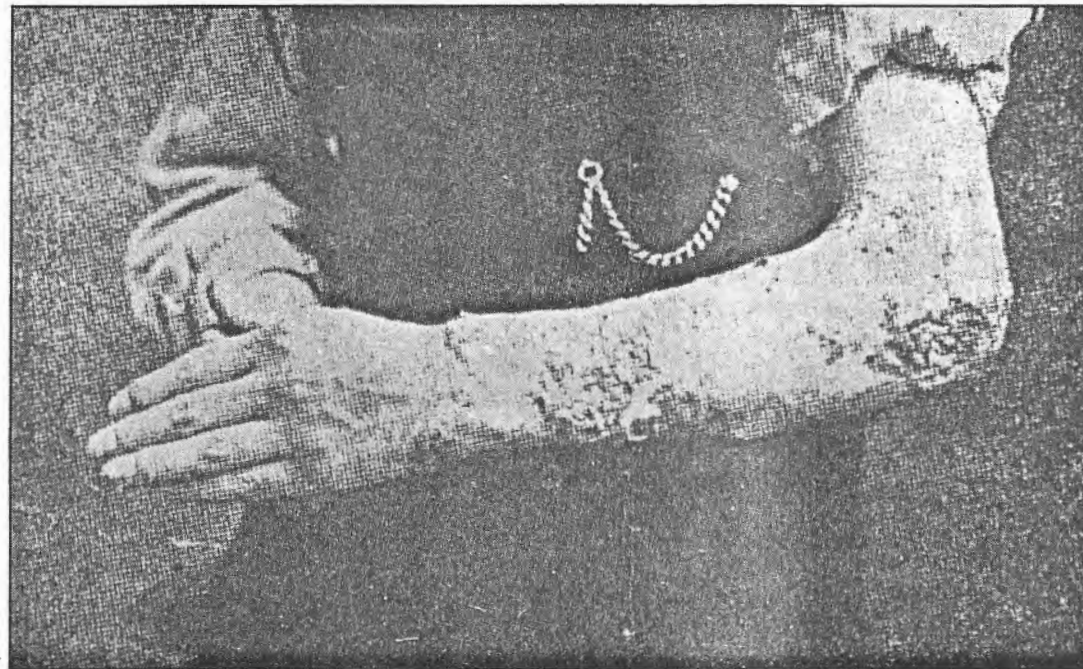
"I have been a regular practitioner of medicine in Boston for thirty-three years. I have studied the question of vaccination conscientiously for forty-five years. As for vaccination as a preventive of disease, there is not a scrap of evidence in its favor. Injection of virus into the pure blood of the people does not prevent smallpox. Rather it tends to increase its epidemics and to make the disease more deadly. Of this we have indisputable proof. In our county cancer mortality has increased from 9 per 100,000 population to 80 per 100,000, or fully 900 percent, within the past 50 years, and no conceivable thing could have caused this but the *universal blood poisoning* now existing."

Inasmuch as the Philippines are one of the most thoroughly vaccinated countries in the world, the following statements from an article by the Committee on Cancer of the Philippine Medical Association, appearing in the medical bulletin of the Bureau of Health, Commonwealth of the Philippines, May, 1940, takes on added meaning:

"This Committee opined that the incidence of cancer in the Philippines had been increasing in recent years . . .

"Cancer and its allied conditions prevail throughout the Philippines, especially in the city of Manila and in the provinces of Batanes, Rizal, Bataan, and Cavite."

THE CRIME OF VACCINATION



Wm. Hamilton, Brannan Farm, Isle of Man, Vaccinated at 3 months of age. Photo taken May, 1928, at the age of 15 $\frac{3}{4}$ years. Arm useless ever since vaccination. Case attended by six doctors in all and never got better.

VACCINES AND THE HEART

There is a growing mass of evidence showing that serums pumped into the bloodstream often cause other diseases. Much of this evidence has been furnished by medical doctors who have placed truth and science above the pocketbook needs of their profession.

Studies have been made which strongly indicate that much of the heart trouble among children today is directly traceable to serums injected into their blood. There has been a pronounced increase in heart ailments among children during the last twenty years, according to researches made by the medical profession. Dr. J. V. DePorte, director of statistics for the New York Department of Health, revealed a surprising amount of heart disease among children in school where a survey was conducted. Rheumatic infection was indicated in more than one-half of the cases.

A study made by the famed Mayo Clinic some years ago, revealed that certain varieties of germs have an affinity for the heart valves. In experimenting with guinea-pigs, the clinic found colonies of injected germs collected on the valves of the heart.

Statistics compiled by the United States Public Health Service reveal that while heart disease in the United States has increased slightly over seven times in thirty years, endocarditis, which includes valvular troubles, has increased nearly twenty times. The same source of information shows that valvular troubles and heart disease as a whole are very much higher in states where the population is dense, such as New York, Massachusetts, and Pennsylvania, where vaccination is used on a greater scale.

According to Louis I. Dublin, statistician for the Metropolitan Life Insurance Company, heart disease is much higher in immigrants from England, Scotland, Wales, Ireland and Germany, where vaccination has been compulsory for a great many years, than it is among native-born Americans. He also notes that immigrants from Austria and Russia, where they have lagged in the use of vaccines, have a lower death rate than the native Americans, attributed to heart ailments.

From "Your Life is in Their Hands" by Cash Asher

H. B. Bradford, author of "Is Vaccination Worth the Risk?" says:

"We are living in an era of blood contamination. Will disease ever be eradicated by such means? Never in the world! Many medical men think it is the most stupendous folly the medical profession has ever engaged in.

"How few of them appear to realize that all these inoculations, which go into the blood, must also go through the heart in the general blood circulation. And people are wondering where this great increase in heart disease and 'heart failure' are coming from!

(Continued on page 29)

"Laboratory products stand a most excellent chance of blasting what little vigor and health is left in the human race. As Dr. J. J. Garth Wilkinson of London well said of vaccination, *'It destroys the newborn soundness of the human body'*. It strikes me as a rather black crime against the body!"

The Chicago Medical Health Department issued the following appalling statement, November, 1925:

"More children of the ages 4 to 14 years die of heart disease in Chicago than of all other children's diseases put together."

P. L. Clark, M. D., Chicago, Illinois, says:

"Intravenous medication -- especially with 'Biologicals' -- are as direct an attack on the heart as an assassin's dagger. This is shown by the almost instant death many times seen when antitoxin is shot into a child."

In "Winged Words", Dr. Herbert Snow, 25 years a surgeon of the Cancer Hospital, London, and a part of the time Senior Surgeon, says:

"Of recent years, many men and women in the prime of life have dropped down dead suddenly, after attending a wedding feast or banquet. *I am convinced that some 80 percent of these deaths are caused by the inoculations or vaccinations they have undergone. These are well known to cause grave and permanent disease to the heart.*

"The coroner always hushes it up with 'natural causes'. I have been trying to get these cases referred to an independent Commission of Inquiry, but so far, in vain."

From "Health Destroyer Satanie",
American Medical Liberty League

ENCEPHALITIS (SLEEPING SICKNESS) FOLLOWS VACCINATION

During the past ten years or more the entire medical world has been disturbed on account of the number of cases of encephalitis (*sleeping sickness*) and other diseases of the nervous system following vaccination.

In a communication addressed to the Citizens Medical Reference Bureau, Inc., December 7, 1932, the United States Public Health Service reported a total of 194 cases of what were "*probably post-vaccinal tetanus*" and 85 cases of "*probable or proven cases of post-vaccinal encephalitis*" in the United States during the period 1922-1931.

Dr. Armstrong in "Public Health Reports", July 22, 1932 says:

"I have also been impressed by the frequency with which post-vaccination encephalitis and also post-vaccinal tetanus have occurred in robust, apparently healthy children."

Drs. McIntosh and Turnbull, two eminent British Medical Scientists informed the British Medical Society in July, 1928 that they had investigated hundreds of cases of encephalitis or sleeping sickness which is a form of paralysis. All of these cases had ended in permanent injury or death *and had directly followed vaccination.* (This information is provided by the Encyclopedia Britannica.)

Hundreds of other similar reports in medical publications, especially foreign, are made by doctors who tell of paralysis cases that followed vaccination of their patients. Epidemics of paralysis, when they occur, follow wholesale vaccinations of children or soldiers. There are other causes of paralysis *but animal experiment and experience prove that vaccination and inoculation, serums or shots, are the chief cause.*

From the Report of the Commission on Smallpox and Vaccination of the Health Organization of the League of Nations, Geneva, August 27, 1928:

"The post-vaccinal encephalitis with which we are dealing has become a problem of itself mainly in consequence of the events of the last few years in the Netherlands and England and Wales. In each of these countries the cases which have occurred have been sufficiently numerous and similar to require them to be considered collectively. Their occurrence has led to the realization that a new, or at least a previously unsuspected or unrecognized, risk attaches to the practice of *vaccination.*"

H. B. Anderson, Citizens' Medical Ref. Bureau
New York City, Bulletin No. 373

ENCEPHALITIS IN HOLLAND

Extracts from "Vaccination in Holland", translated from the Dutch official document ordering the suspending of vaccination for one year, as published in the "Vaccination Inquirer" April 2, 1928.

"In 1923 and following years, cases of encephalitis after vaccination have occurred. As in most cases this encephalitis has shown itself 10 to 13 days after vaccination, one has been led to suppose that there must be *some connection between vaccination and the divergence of the central nerve system as stated from the diagnosis.*

"One could therefore not maintain any longer that vaccination against smallpox has to be considered as entirely harmless, although the danger may be said to be very slight . . .

"The government, with a view to the present danger of causing encephalitis after vaccination, for which there are no decisive remedies yet, have thought it expedient to suspend the indirect compulsion for one year."

Case History of
Pneumonia serum victim .

On June 25, 1933 Sybil Knopf, a five year old girl was brot to my office by her mother and grandmother. Her appearance can best be described by comparing her to pictures of famine sufferers, to which must be added some marked deformities.

To begin at the beginning, the child had wheepringcough the previous August. She seemed to recover quite fully, but in December of that year she had what was called "flu=pneumonia" by the attending medical doctor. She made a fair recovery, and the following February again had pneumonia. The same doctor was attending her and he decreed that she must be given pneumonia serum or she would continue to have pneumonia. The serum was given and within the next few weeks there followed such a series of ills as no child should ever have to suffer. After going to various medical people and finally a child's surgeon she was brot to my office on the date mentioned above, about five months after the second attack of pneumonia. She could not stand, her mother carried her into the office. Talipes equines was present to such a degree that she could not balance herself, and the toes were drawn toward the median line so that a shoe could not be placed on the foot. She was the most nervous child I had ever put my hands on, had actually chewed the bed covers, and some of the collars off her dresses. On the torso was a red rash, which if the mother had not said it was NOT, I should have said was red measles. The measles odor was also present. There were several open sores which she had literally dug into her skin, seemingly from sheer nervousness. She was past five years old, AND WEIGHED 29 pounds. Bradycardia was so marked I made no effort to count pulse, in fact I doubt that it could have been counted. She had no appetite (naturally!)

After a few adjustments sleep and appetite returned, and soon she began to gain flesh and by November she was practically well and was able to walk. Now (nearly five years later) she gets about like any other child.

There is not the slightest doubt in my mind that the serum was the cause of this condition developing, for there was no other reason to be found for it.

The foot deformities were due simply to muscle contraction and so yielded readily to massage and manipulation. The CHILD SPECIALIST had said that surgery was indicated, which would have been another colossal blunder, and had she survived, she likely would have been a cripple for life, since her feet were perfectly normal previous to her illness. Thank Heaven, that calamity was avoided.

Grace E. Brown D.C.

Grace E. Brown, D.C.

THE PASTEUR TREATMENT FOR HYDROPHOBIA

Much undeserved credit has been given to Pasteur for his contributions to health science.

The National Anti-Vivisection Society of England collected from the official returns of Pasteur Institutes a list of 1,220 deaths after treatment between 1885 and 1901. Concerning these figures, Dr. George Wilson says:

"Pasteur carefully screened his statistics, after some untoward deaths occurred during and immediately after treatment, by ruling that all deaths which occurred either during treatment or within 15 days after the last injection - should be excluded from the statistical returns. Because of this extraordinary ruling, the death rates in all Pasteur Institutes were kept at a low figure."

The late Dr. Charles Bell Taylor in the National Review, July, 1890, published a list of Pasteur's patients who had died after treatment while the dogs that had bitten them got well.

High-Lights on the Rabies Racket- Anti-Vivisection Association of Oregon

Dr. Wm. Brady, M.D., Springfield, Ill., State Journal, May 4, 1940:

"I would not take Pasteur treatment in any circumstances, because I fear the consequences of injection of the virus more than I do the remote possibility of getting rabies. I do not believe rabies occurs in man."

"Rabies, A Profitable Racket?"
Vivisection Investigation League, N.Y. City

TUBERCULIN TESTS

Facts from the U. S. Health Bulletin, "Tuberculosis, Its Predisposing Causes" (Page 2)

Tuberculin is an uncertain, unreliable and sometimes dangerous product. It is made by putting tubercle bacilli, the living germs of tuberculosis, into broth. These germs live and breed in the broth for several weeks until it is full of them. They eat the broth and excrete in it. Then this mixture of tuberculosis germs, their excretions, and the stale broth is cooked, the dead germs strained out, and what is left is called "tuberculin". Quoting Dr. F. E. Harrington, Health Commissioner of Minneapolis, Minnesota, "This substance is a quasi-toxin and is poisonous to the human body."

This substance is what is introduced into the human body in making tuberculin tests. Tuberculin tests (the "Mantoux" test, "Von Pirquet" test, and others) are represented by their promoters to be reliable tests for tuberculosis infection, and harmless. The following quotations from recognized authorities show their unreliability and dangers.

"It has been found that thousands of persons react to the tuberculin test who have no signs of tuberculosis. About 90 percent of all children between the ages of 12 and 13 and practically all adults will give a positive reaction . . . Most people who react to the tuberculin test are apparently healthy and never break down from tuberculosis, although they have received living tubercle bacilli into their bodies, perhaps many times."

Maurice Fishberg, M. D., in his book on "Pulmonary Tuberculosis", quotes Sahli, the tuberculosis authority, as follows:

"When carelessly performed with excessive doses, latent or quiescent lesions may be flared up into activity. . . Living and virulent tubercle bacilli may appear in the blood after an injection of tuberculin. In some cases it is shown that hemoptysis is provoked by the test . . . In general the reaction consists of a transient toxic injury to the body, and the nervous system bears the brunt of the traumatism . . . The use of tuberculin for diagnosis purposes ought to be condemned. It is unreliable both positively and negatively. Diagnostic injections are dangerous."

Esmond D. Long, M. D., in "The Journal Lancet", April, 1935, quotes from "Tuberculosis in College Students":

"People infected with tuberculosis, for constitutional reasons, vary in their sensitivity to tuberculin about a million times. A dose that will barely elicit a reaction in one will cause superficial necrosis (death of tissue) in the arm of another."

Minneapolis' experience with Mantoux testing and X-raying of teachers and employees of the city's public schools for 1933 and 1934 was:

Number injected with tuberculin (Mantoux test)	2190
Number electing to be X-rayed instead	<u>1384</u>
Total number Mantoux tested or X-rayed	3574

Of the 2190 given the Mantoux test (injected with tuberculin), 1078 or over 48% gave a positive reaction, the reaction claimed to indicate tuberculosis infection. Those giving this positive reaction were required to have an X-ray taken. Although the Mantoux test indicated that 1078 of those tested were infected with tuberculosis, as the result of further examination, not one teacher tested by either or both methods had to be dropped from the staff because of tuberculosis -- a striking proof of the worthlessness of the Mantoux test as a means of diagnosing tuberculosis.

The tuberculin injection and X-raying together cost the city of Minneapolis a total of \$6598.70. If the Mantoux test with its X-ray follow-up had been extended to include the Minneapolis school children, the cost to the city or their parents would have been close to \$150,000. In the interests of good health, personal freedom and economy, every citizen should oppose the use of public funds for tuberculin testing and all other kinds of doubtful and dangerous inoculations and vaccinations.

-- Facts Regarding Tuberculin Tests for Tuberculosis
National Health Foundation, Inc., Minneapolis

SYPHILIS ACQUIRED FROM VACCINATION

In 1940 we spent \$4,379,250 federal funds, not to mention the state appropriations for the same purpose, in a campaign against Syphilis. The allocation for 1941 is \$6,200,000. (Facts gleaned from The Journal of the American Medical Association, September, 1940).

This tremendous expenditure of the tax payers' money was not begrudged by the public-minded tax payer, for he was faced by the fact that in the past few years, syphilis has steadily increased in the United States, and he realized that something should be done about it. What he did not realize, because such information is carefully guarded by those who profit from the manufacture of vaccines, is that *vaccination, as practiced today, is syphilizing the human race!*

To substantiate this alarming statement we offer you the words of world-renowned medical men:

H. Valentine Knaggs, L. R. C. P., (Eng.) in his "The Truth About Vaccination", says:

"A careful examination of the available data relating to Jenner's first inoculations with cowpox matter direct from the cow shows that he was quite unable to produce a safe vaccine lymph from it which, after inoculation, was free from symptoms indistinguishable from those of syphilis."

Dr. Knaggs says further:

"It is equally significant, according to Dr. Deane, an American physician of good standing, 'that the Wassermann and Noguchi tests show positive in persons recently vaccinated, who have never contracted syphilis nor inherited it.'"

"The Wassermann test is one upon which physicians now rely as a means of diagnosis in cases of syphilis. If the reaction is positive, the patient is considered to be effected with that disease; if negative, to be free from it."

"I, myself, subjected three tubes of vaccine lymph, obtained from three separate reliable makers, to the Wassermann test. They were found to show a strong positive reaction."

Dr. Knaggs's 117-page book is filled with the opinions of high medical authorities on the vaccination question. Every one of them is of the strong opinion that anti-smallpox vaccination is a fertile source of syphilitic contamination.

"The Syphilis Campaign", American Medical Liberty League, Chicago

Dr. L. Duncan Bulkley, in his work, "Syphilis in the Innocent", cites 1,200 cases where syphilis was introduced by vaccination!

PETITION TO THE PRESIDENT



FIG. 5. Photograph of a little English baby two months old, taken after death, killed by vaccination in thirty-six days. This is a very severe and frequent form of fatal vaccination known as "Generalized Vaccinia," where the vaccine sore spreads all over the body in a series of big confluent pustules very like confluent smallpox, being thus clearly an aggravated case of pus infection and septicemia.

Dr. W. J. Collins, B.Sc., M.B., M.R.C.S., writing from St. Bartholomews Hospital, London, said:

"Pathology has taught us long since that syphilis may be conveyed by infected blood or the secretions which are its offsprings. Statistics complete the evidence by showing that the deaths from infantile syphilis per million births were, under *enforced* vaccination, 1,738, as compared with 564 under *voluntary* vaccination."

When the American government puts a stop to the unclean, unscientific vaccination fetish, and substitutes education, sanitation, sensible hygiene and decent economic conditions for the people, there will be little to worry about from the standpoint of venereal diseases. All the "606", mercury, bismuth and iodides in existence never did and never will cure syphilis. These murderous concoctions only "seal up" within the human organism the very disease which they are claimed to cure.

Henry Lindlahr, M. D., in his "Who Makes the Damaged Goods?", says:

"What is the actual result of local symptomatic suppression by means of injections, dusting powders, cauterization and internal medication by means of '606', etc.? Nature's efforts to eliminate the venereal disease taints from the body through acute inflammatory discharges or ulcers are effectively suppressed. The venereal virus is driven into the system. The poisonous antiseptics, alternatives or germicides 'lock up' the disease taints in the body. These taints are living germs which grow and multiply like weeds in the soil they have permeated, the entire organism."

"The disease diathesis or morbid constitution due to such suppression is frightfully on the increase. Popular consciousness would be shocked and horrified if people knew what an enormous percentage of our population is affected directly or indirectly by these venereal taints or rather, by the accompanying drug-poisoning."

No sensible person objects to the sane control of the life-destroying venereal diseases. But the orthodox medical profession has had thousands of years in which to show what it can do -- which has been worse than nothing at all. Now, let the so-called unorthodox schools of healing go to Washington and *DEMAND* that they be given sufficient funds to demonstrate the efficacy of *THEIR* methods of treating venereal diseases.

The orthodox medical profession, through local, state and federal health departments, is putting on a campaign of "scare" propaganda calculated to frighten the people into accepting all sorts of "preventive" inoculations -- with great pecuniary profit for the serum manufacturers as well as the medical profession.



FIG. 4 Multiple Vaccinations spread by finger-nails.

The present syphilis campaign caps the climax in "fear" propaganda. Horrible tales of the consequences of "innocently acquired" syphilis are daily dished up for public consumption; and already the medical profession is counting on "cashing in" by demanding huge federal appropriations to carry on the work.

"The Syphilis Campaign,"
Amer. Medical Liberty League, Chicago

- 0 -

EXCERPTS FROM "QUEST", JULY, 1926:

VACCINATION MEANS SYPHILIZATION, AND COMPULSORY
VACCINATION MEANS SYPHILIZATION BY LAW

Vaccination Indicted by Medical Authorities

To compare vaccination with syphilis is like waving a very red rag to a Spanish bull, as far as the vaccinationists are concerned. From Matthias Nicoll, Jr., M. D., to Dr. Keane of Philadelphia; and from the two-by-four county medical organization to the big national menagerie, they are all up on their hind legs yelling "outrage" over the possible connection of vaccination and that most dreaded of all diseases, "SYPHILIS".

When the anti-vaccinationists put out their definition of vaccination as,

"The inoculation of a healthy person, with putrid pus, taken from a festering sore, on a diseased animal, and of a distinct syphilitic character",

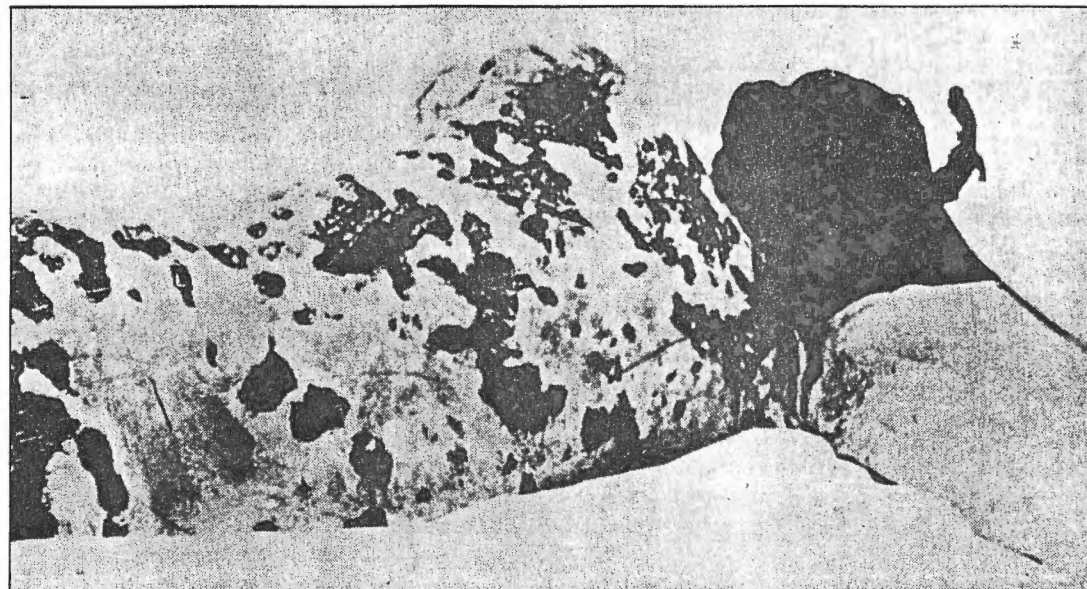
there was a great cry raised in the house of the vaccination god, Rimmon. Some said it was a "lie". Some said it was a libel on Jenner and his "great discovery". Others challenged the proofs. The latter were the more reasonable, and are entitled to the evidence in the case and the charge. Anti-vaccinationists should not side-step their own issue. And pro-vaccinationists must not squeal or ask for a suspended sentence if convicted on self-invited charges. We are not going to express our own opinion on the relationship of vaccination and syphilis, but will permit medical men and medical science to speak in open court on this matter:

"Dr. W. R. Hadwen, M. D., M.R.C.S., L.R.C.P., J.P., in an address delivered in Town Hall, New York City, in May of 1926, declared:

"Vaccination produces a condition analagous to syphilis."

Professor E. M. Crookshank, M.D., London, Professor of Bacteriology, Kings College, told the Royal Commission:

"We have not a known test by which we can possibly distinguish between lymph which is harmless, and one which might be harmful to the extent of communicating syphilis."



[110]

FIG. 11. Horrible Case of Cowpox in a Woman.

Epidemic of 1902. Back view of a woman suffering from Foot and Mouth Disease, or Virulent Cowpox, caused by Vaccination. Photograph shows final stages of eruption and was taken a short while before death. Note large blotches all over body caused by several vesicles running together, then breaking and exoriating, leaving large raw sores like big scalds or burns.

Dr. Charles Pigeon of France, at the anti-vaccination congress held at Cologne, said:

"Vaccination exposes the vaccinated to syphilis."

The sixth report of the Royal Commission, on page 617, contains a list of 1,000 vaccino-syphilis cases.

Sir William Osler, in his "Principles and Practice of Medicine", 8th Edition, 1918, page 330:

"Influence of vaccination upon other diseases: A quiescent malady may be lighted into activity by vaccination. This has happened with congenital syphilis, occasionally with tuberculosis."

Dr. Brundenell Carter, F.R.C.S., L.S.A., Surgeon to St. George's Hospital, in the "Medical Examiner", May 24, 1877, stated:

"Syphilitic contamination by vaccine lymph is by no means an unusual occurrence, and it is very generally overlooked, because people do not know when or where to look for it. I think a large proportion of the cases of apparently inherited syphilis are in reality vaccinal; and that the syphilis in these cases does not show itself until the age of from eight to ten years, by which time the relation between cause and effect is lost sight of."

Professor Robert A. Gunn, M.D., New York, in his work, "Vaccination, Its Fallacies and Evils", says on page 13:

"Every physician of experience has met with numerous cases of cutaneous eruptions, erysipelas, and syphilis, which are directly traceable to vaccination."

Charles Creighton, M.D., in his "Natural History of Cowpox and Vaccinal Syphilis", page 124, says:

"I claim the phenomena of so-called vaccinal syphilis as in no respect of venereal origin, but as due to the inherent, although mostly dormant, natural-history character of cowpox"

The late Dr. William Hitchman, consulting surgeon to the Cancer Hospital, Leeds, England, and formerly public vaccinator to the city of Liverpool, expressly stated that:

"Syphilis, cancer, erysipelas, and almost all diseases of the skin, as well as phthisis, have been either conveyed, occasioned, or intensified by vaccination."

Dr. Carter, of St. George's Hospital, London, says:

"A large proportion of the cases of apparently inherited syphilis are in reality vaccinal."

Dr. Scott Tebb in his work, "A Century of Vaccination", page 310, says:

"The disease that cowpox most resembles is not smallpox, but syphilis."

Dr. J. Beaney, Melbourne, Australia, in his work on "Constitutional Syphilis", page 373, says:

"And I at once announce at the outset my firm belief that syphilis is in very many instances communicated by means of Child's Vaccine Lymph."

It is a frightful thing to taint the blood of a great nation by vaccinal syphilis, and it is about time we halted the infamous process.

If the only way to secure immunization from the long chance of smallpox is being vaccinated with a short and close chance of the revolting symptoms and exhibits of syphilis, then let the people have smallpox. If the great authorities we have quoted are to be believed, and they are as worthy of belief as the perpetrators of vaccination, then it is about time the State stopped making vaccination with its dangerous syphilitic tendencies, a condition for the education of the American boy, and the American girl.

Dr. F. L. Oswald, so well known to all Health Culture Readers of some years ago, wrote the following about vaccination:

"Smallpox would probably have been banished from the lands of civilization as effectually as the 'Black Death' if its seeds had not been perpetuated by an exceptional circumstance, viz: the chance to turn a sham prevention into a source of financial profit."

Henry Victor Clay in "Plain Talk", November, 1932, says:

"It is the old, old story of bribery, graft corruption, and dealing in human lives, as though we were so many pigs. The yearly turnover in biologicals, vaccines, and the rest of the mysterious medicinal lotions, potions, powders, liquids, etc., runs into many millions of dollars. That stuff has to be sold, regardless whether its effects kill or cure."

Extract from an address by William D. Johnson, M. D., President of the Medical Society of New York State, June 2, 1931 (From New York State Journal of Medicine, June 15, 1931):

"What we call the science of medicine is a most variable and unstable affair, constantly changing and constantly to change. We are justly proud of the body of scientific medicine of today. If we could live into the next generation, we would be ashamed of it. The very ardor with which we defend it shows our suspicion of it. Men fight for their beliefs, not for the things they are sure of."

ANAPHYLACTIC GANGRENE

RESULTING FROM INJECTION OF DIPHTHERIA ANTI-TOXIN

On the several pages following are shown four illustrations, A, B, C, and D, showing the progressive stages of gangrene and ulceration resulting in a child inoculated with diphtheria anti-toxin.

Illustrations A, B, and C were originally from The Journal of the American Medical Association, April 25, 1931, illustration D from The Journal of the American Medical Association, February 18, 1933. They have since been reprinted by the Vivisection Investigation League, New York City; the American Medical Liberty League, Inc., Chicago; and The Chiropractic Home magazine.

- o -

This girl, aged five years, was given 1000 units of diphtheria anti-toxin in the left buttock on March 27, 1940. On April 1, the right buttock became enormously swollen and very painful.

ILLUSTRATION A: Taken on the 11th day after the anti-toxin had been given. The child was in great pain, and pus was forming in the affected buttock.

ILLUSTRATION B: Taken on the 18th day. A large oval mass of gangrenous skin, approximately six by eight inches, was cut away, leaving the buttock muscles "exposed like an anatomic dissection". The child was also suffering considerable pain and tenderness in the abdomen, back, and legs, and perspired profusely. Her color had become yellow and waxy.

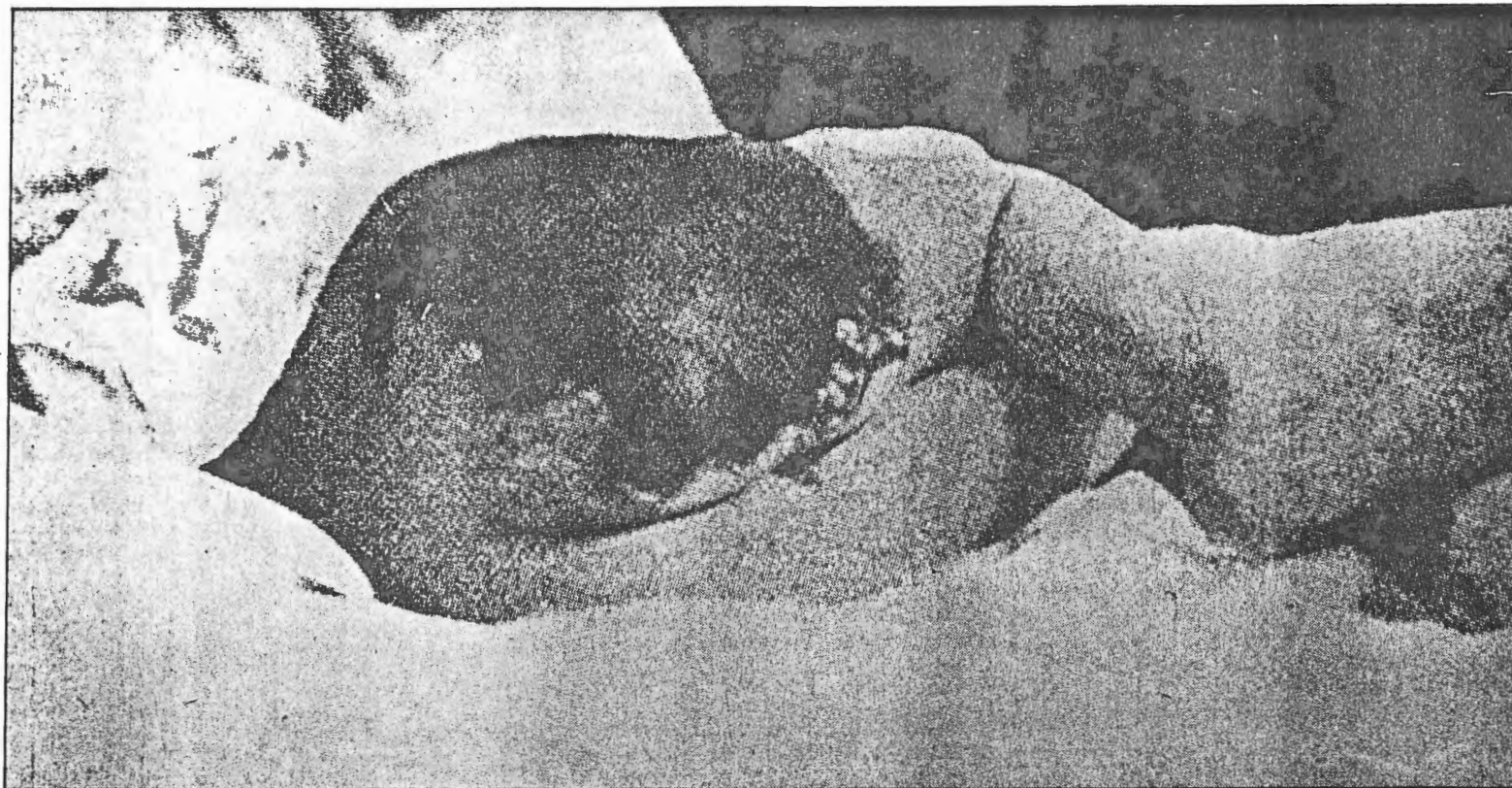
ILLUSTRATION C: Also taken on the 18th day. Shows a posterior view of the child's body.

ILLUSTRATION D: Taken on the 28th day after the first serum injection. The child was placed in an oxygen tent, but died less than an hour later. Cause of death: anaphylactic gangrene.

- o -

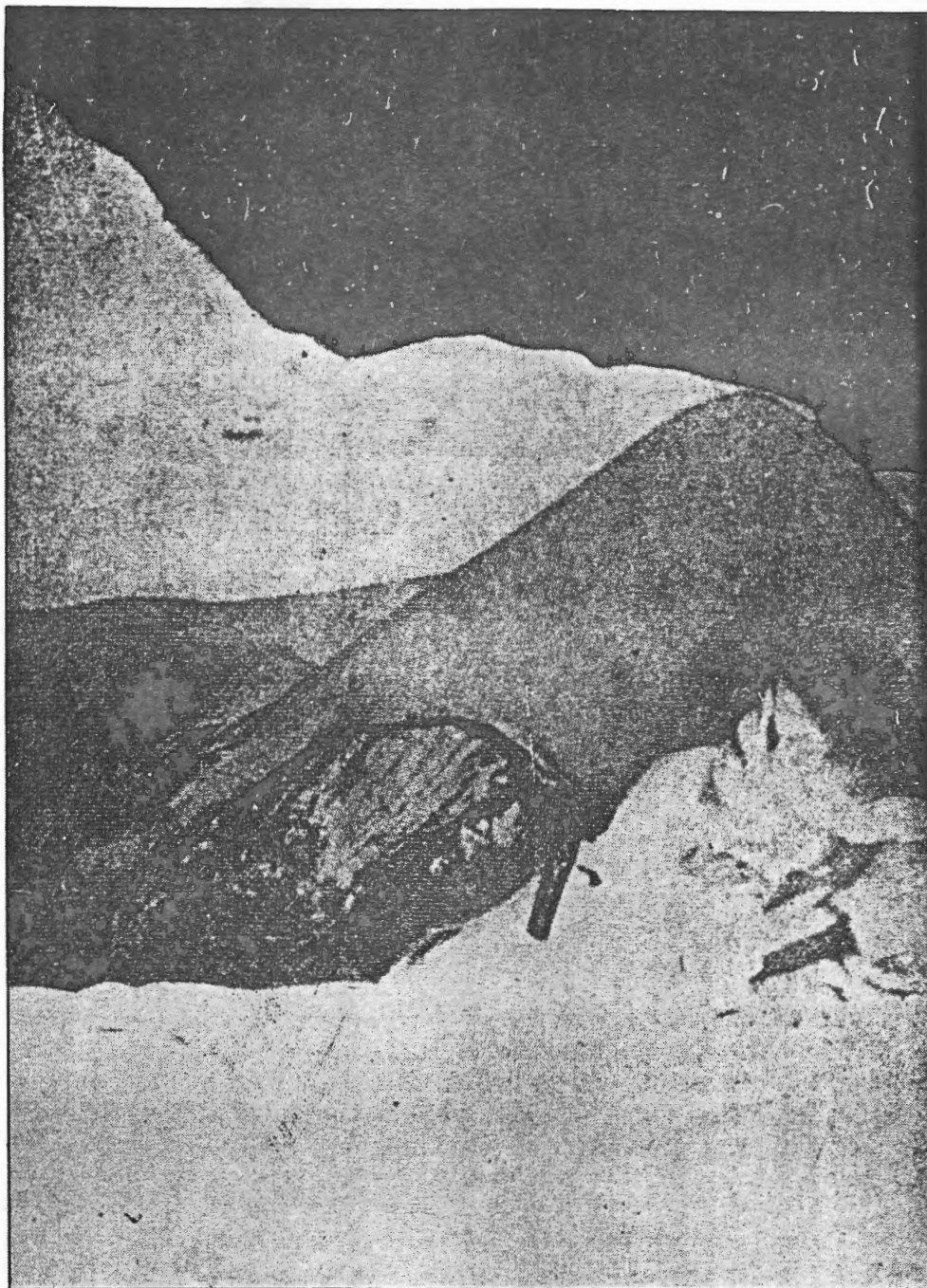
Note: Anaphylaxis is defined as "a state of allergy marked by unusual or exaggerated susceptibility of the organism to foreign protein.

"As now used, the term is restricted to a condition of sensitization in laboratory animals PRODUCED BY THE INJECTION OF FOREIGN MATTER, SUCH AS HORSE SERUM". (The American Medical Dictionary, W. A. Newman Dorland) (Caps by editor)



A. Area of gangrene with ulceration at margin.
(Eleventh day after serum injection.)

The effect of vaccination.
Taken from the Chiropractic
Home. 1938. *March issue.*



B. "Muscles exposed like an anatomic dissection."
(Eighteenth day.)

The effect of Vaccination.
Taken from the Chiropractic
Home. 1938. *March issue.*

DANGERS FROM DIPHTHERIA ANTI-TOXIN

In a booklet on diphtheria immunization Dr. M. Beddow Bayly, M.R.C., L.R.C.P., says:

"The danger of producing ANAPHYLAXIS (Arthus phenomenon) is common to all mixtures which contain ANTI-TOXIN, for this is derived from an animal serum."

In an article by I. Harrison Tumpeer, M.D., Abe Matheson, M.D., and D. C. Straus, M.D., published in "The Journal of the American Medical Association", April 25, 1931, page 1373, referring to dangers resulting from the different uses of horse serum, it is said:

"It is reasonable to suppose that many individuals inoculated with toxin-antitoxin derived from horse serum might subsequently require horse serum for such conditions as scarlet fever, pneumonia, tetanus, hemorrhage, or even diphtheria itself."

WHY I OPPOSE INOCULATION AGAINST DIPHTHERIA

Writing in "Health for All", W. A. Sibly, M.A., J.P., a noted British educator, states his views on diphtheria immunization:

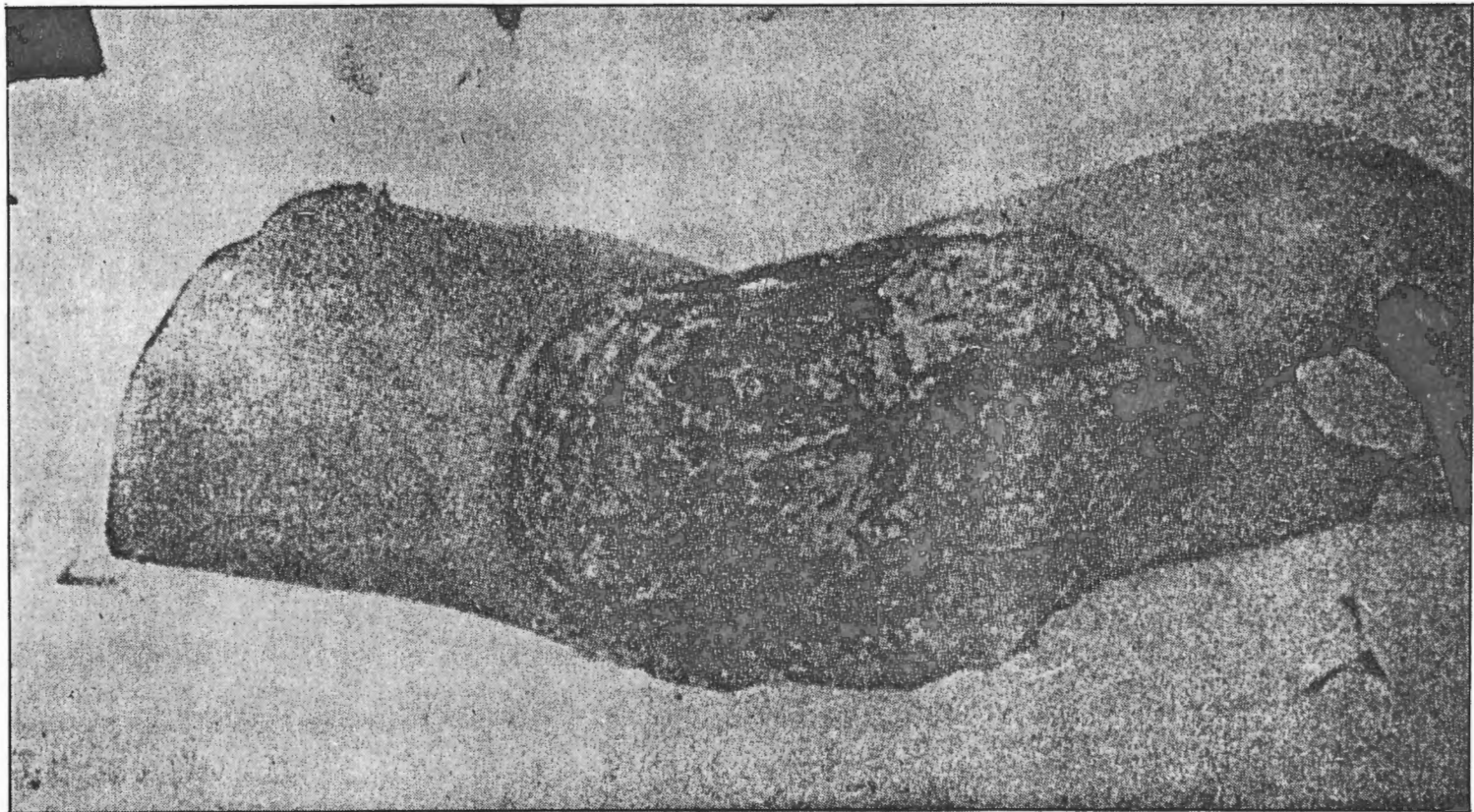
"My objection to immunization against diphtheria has a three-fold basis. Firstly, I believe that such immunization, like all other prevalent preventive inoculations and injections, leads men away from the true highroad to health. Diseases such as diphtheria, typhoid and smallpox would never occur provided that housing and sanitation were all they should be, and the water, milk, and food supply were above reproach.

"Secondly, any wholesale compulsory immunization would affect millions of people for whom the risk of diphtheria is almost indefinitely remote. For more than fifty years I have been associated with an English boarding school. For the last twenty-seven years I have been its headmaster, and at the present moment I have three hundred boys under my care. During the whole of this period I have never known a real case of diphtheria. If immunization had been the rule, and one had listened to the scaremongers, some thousands of boys would have been thus treated to no purpose and at some peril and cost, either to individuals or to the community.

"Thirdly, no operation in which a virus, no matter how attenuated, is thrust into the blood-stream by puncturing Nature's protective covering of the skin, is altogether free from risk, and resultant tragedies are not unknown. Nor are the supposed gains substantiated.

--Science Sidelights, Vol. 6, No. 12.

Dr. V. T. Allen of Philadelphia said he never had seen a fatal case of diphtheria in an unvaccinated child.



C. Posterior view (eighteenth day):
nine days before death.

The effect of Vaccination.
Taken from the Chiropractic
Home - 1938. *March issue.*

ADMITTED DANGERS FROM HORSE SERUM

The astounding difference between the statements that medical officials give to the press for the general public to read and the articles which appear in medical magazines for members of the medical profession, must give rise to much speculation on the part of a very thoughtful person.

While the public is assured that vaccines are absolutely harmless, medical journals abound in such articles as that by A. E. Bennett, M.D. entitled "Horse Serum Neuritis" which appeared in The Journal of the American Medical Association, February 18, 1939, p. 590.

In it the author cites articles by 25 other authors, giving the dangers arising from horse serum, such as paralysis, tetanus, serum sickness, diseases of the nervous system, neuritis. *YET PRACTICALLY ALL THE VACCINES AND SERUMS TODAY THAT ARE HERALDED FAR AND WIDE AS PREVENTIVES AND CURE-ALLS ARE MADE FROM HORSE SERUM.* It is time - and over time - that adults should know; that mothers should know the dangers of these inoculations, which they are allowing the medical profession, which includes the boards of health, to foist on their children. Medical literature shows these vaccines and serums to be not only dangerous, but still in the experimental stage.

Dr. Bennett goes on to say:

"Serum sickness probably would occur in all cases if enough serum were given. Local itching, swelling, generalized urticaria, fever, enlargement of lymph glands, polyarthritides (inflammation of many joints), general malaise, leukopenia, albuminuria, fall of blood pressure and decreased coagulability of the blood make up the complete clinical picture.

"Patients having profound atrophy within six weeks after serum disease are slowest to recover....About 20 percent are left with residual weakness and atrophy, especially of the deltoid muscles. The large majority recover in about six months. Recovery occurs as late as eighteen months after injury.

"Physicians should avoid indiscriminate injections of horse serum antitoxins which are non-specific in their action or of which the therapeutic value is questionable . . ."

He reports 5 cases in patients who were critically ill with "a severe grade of serum neuritis." In one patient: "Observation one year after the serum sickness revealed no improvement in the condition."

In one case, the author states: "The patient received compensation for seven months, which illustrates the importance of the problem these complications present for the insurance companies."



**D. Rear view: Anaphylactic gangrene,
28 days after first serum injection.**

the effect of Vaccination.
Taken from the Chiropractic
Home 1938. *March issue.*

DIPHTHERIA TOXIN-ANTITOXIN

"Toxin-antitoxin (the diphtheria 'preventive') is made up of the toxins which according to the theory are the CAUSE of diphtheria, plus ANTIToxin. The introduction of this matter into your child's body is the introduction of the supposed CAUSE of diphtheria and its SUPPOSED ANTIDOTE. It is based on the pernicious fallacy of which I have told you so often, namely, that disease is prevented and cured by its cause.

"Antitoxin is mere *hypothesis*. It cannot be demonstrated to actually exist.

"So great is the danger of toxin-antitoxin's causing diphtheria that the Austrian government has forbidden its use . . .

"In this country, physicians freely discuss anaphylaxis (among themselves); its damages and dangers, immediate and remote; the deaths and degeneracy caused by it; and also the facts that with the increasing use of serums, there is an increasing incidence of anaphylaxis, and that as time goes on there will be an increasing number of children who will be "*subject to anaphylactic reactions*".

"But one searches in vain for any evidence of repentance. There is never a hint that these damaging and dangerous practices should be abolished. They are the physician's source of greatest income, and they will not abandon them until an outraged public puts an end to them. *NO EVIL IS EVER CORRECTED BY THOSE WHO PROFIT OFF IT.*"

Herbert M. Shelton, in "The Golden Age", April 17, 1929

- o -

L. C. Little in "Know the Facts"; Dr. J. H. Tilden, editor of his "Health Review", and author of many medical works for popular instruction; Dr. Elmer Lee, New York City, editor of "Health Culture" magazine; Dr. Charles E. Page, Boston, author of "Consumption" and "Care of Infants"; Dr. Alexander Wiler, Professor of Physiology, U. S. Medical College, New York; Dr. Felix Oswald, New York City, author, medical writer, and traveler; Dr. M. R. Levenson, New York City, author of "Vaccination Pathology"; Dr. Zachary T. Miller, Pittsburgh, author of "Declaration of Emancipation"; and hundreds of other American physicians, have declared themselves opposed to vaccination; forced thereby by conviction, against their education, their preconceived opinions, and their natural inclination not to oppose accepted theories.

"Vaccination and Ruin",
New York Anti-Vivisection Society

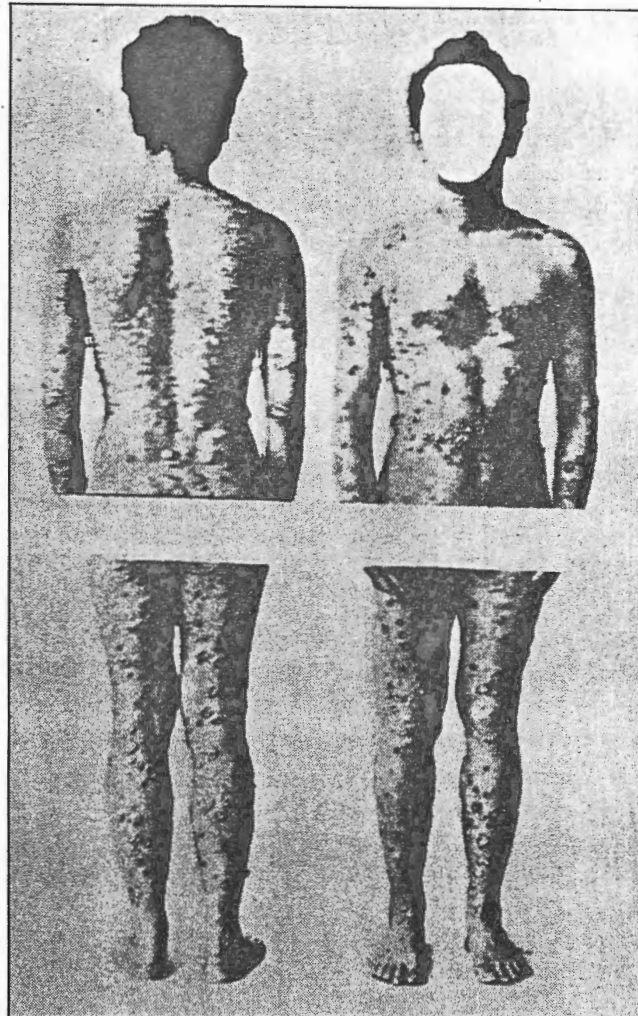


FIG. 12. Foot and Mouth Disease in a Vaccinated Man.

Epidemic of 1902. Back and front views of man suffering with Foot and Mouth Disease, or Virulent Cowpox, caused by Vaccination. Photograph shows early or mid stage of eruptions, which first appeared four and a half weeks after vaccination. Recovered after nine successive eruptions of this kind in five months after vaccination. Note "umbilicated" form of eruptions like vaccination sores, proving positive relation to Vaccination and Smallpox. Compare with Figs. 2, 4 and 6.

FOOT AND MOUTH DISEASE

The report of the Surgeon General of the Army, 1918, gives the number of admissions to hospitals during the year 1917, on account of vaccinia and typhoid vaccination combined, as 19,608. The report for the year 1918 gives the number of like hospital admissions as 10,830.

Conclusions contained in Circular 147, issued by the Bureau of Animal Industry of the United States Department of Agriculture, June 16, 1909, giving the findings of Drs. John R. Mohler and Milton J. Rosenau in an investigation conducted by them of "The Origin of the 1908 Outbreak of Foot-and-Mouth Disease in the United States.":

"(1) The recent outbreak of foot-and-mouth disease in this country started from some calves used to propagate vaccine virus.

"(2) The vaccine virus used on these calves has been proved to contain the infection of foot-and-mouth disease.

"(3) The outbreaks of foot-and-mouth disease in 1902-3 probably had a similar origin.

"(4) It is probable that the foot-and-mouth infection got into the vaccine virus in some foreign country where the disease prevailed, and was introduced into the United States through the importation of this contaminated vaccine.

"(5) The symbiosis between the infections of vaccinia and foot-and-mouth disease is especially interesting. Animals vaccinated with the mixed virus, as a rule, show only the lesions of one of these diseases, namely, vaccinia; nevertheless the infectious principle of foot-and-mouth disease remains in the vaccinal eruption."

Sir William Collins, who resigned in disgust as Public Vaccinator of London, had this to say of vaccination:

"Consumption, scrofula, and other blood diseases were comparatively unknown before smallpox and cowpox inoculation were introduced. . . I am of the opinion that smallpox has never been diminished by vaccination; on the contrary, in those of a smallpox habit of body, it is often the means of calling that disease into operation. . . Vaccination in the absence of sanitation is inoperative on smallpox mortality.



Mr. Charles Engle, 419 Poyntz Ave.
Manhattan, Kansas, both arms and
shoulders paralyzed from the use
Tetanus Serum. Taken in 1938.

TETANUS (LOCKJAW)

CHILD DIES FROM LOCKJAW FOLLOWING VACCINATION

Wilkes-Barre, Pa., Sept. 24 (AP) --Mary Woytkwycz, six, died at a local hospital last night of lockjaw. The little girl started to school on September 4 and was vaccinated by a physician. Infection followed and on Friday her jaws locked. Several hundred thousand units of tetanus anti-toxin serum were used in efforts to save the child.

(Scranton, Pa., Times, Sept. 25, 1928)

VACCINATION TETANUS FATAL TO TWO CHILDREN

York, Pa., Sept. 25 --Lockjaw, said to have developed from vaccination, today caused the second death of a child in York County in the last 36 hours.

Fairy Crone, 6, of York, died today, while Clair Drawbaugh, 7, of Dover died late Sunday.

Both children have recently entered school and were vaccinated in compliance with the law. Tetanus set in suddenly in both cases and the children were in serious condition when physicians were called.

It was said no investigation is planned.

(Washington, Pa., Observer, Sept. 26, 1928)

Allentown, Pa., July 27 --Dorothy, five-year-old daughter of David Schmoyer, of Alburtis, died in the Allentown Hospital today of tetanus. She was admitted yesterday and, although surgeons made every effort to save the child's life, their efforts were in vain. The little girl was vaccinated several days ago, preparatory to attending school in the fall.

(News item from the
Philadelphia Record, July 28, 1927)

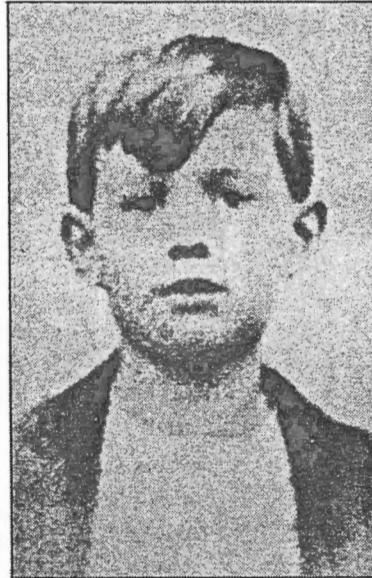
Stanley Thomas, from the Laboratory of Bacteriology, Lehigh University, Bethlehem, Pennsylvania, in an article published in the Journal of Infectious Diseases, November, 1927, said:

"The dangers involved in its use (vaccine virus), however, cannot be denied. Its preparation, while conducted with the utmost care and under the best scientific supervision, does not preclude the chance of serious consequence due to contaminating bacteria. The staphylococcus present in the ordinary commercial vaccine virus (in spite of the glycerol and phenol preservative) may not be in itself pathogenic but by aiding anaerobic conditions it certainly can, and does, prepare a favorable field for the growth and toxin development of the tetanus bacillus. Although not in the vaccine itself, this organism is an opportunist in any wound, and tetanus following vaccination is always to be feared."

From "The Facts Against Compulsory Vaccination"
by H.B. Anderson, Citizens' Med. Ref. Bureau, N. Y. C.

HORRORS OF VACCINATION

CASE No. 7



FREDERICK STINEFOOT

FREDERICK STINEFOOT, only son of William H. Stinefoot, No. 226 Mullett St., Dunkirk, N. Y.

Age 10.

Vaccinated Sept. 22.

Commenced to complain Oct. 5,—13 days from vaccination

Died Oct. 13.

Diagnosed "Tetanus."

This child was in splendid health. The night before he was stricken he was feeling especially well. On Monday morning his neck was stiff shoulders all drawn up. Dr. Hallenbeck was called but he insisted the family physician be employed. He was out and Dr. Ellis, the health officer, was called. The case was diagnosed as tetanus. Convulsions appeared at 6 o'clock. No serum was available until Tuesday, Oct. 10 about 10 A.M. A quantity injected intra-spinously. Removed to Brook Hospital, Dunkirk, about 4 P.M. same day and died fifteen minutes after admission.

FOR THOSE WHO DOUBT THAT VACCINATION CAUSES DEATH

MEDICAL CERTIFICATE OF DEATH	
16. DATE OF DEATH	Sept 24 1928 (Month) (Day) (Year)
17. I HEREBY CERTIFY. That I attended deceased from Sept 21 1928 to Sept 24 1928 that I last saw him alive on Sept 24 1928 and that death occurred, on the date stated above, at 6 a.m. The CAUSE OF DEATH was as follows: Tetanus Developed Secondary to Vaccination left arm. (duration) yrs. mos. days	
CONTRIBUTORY (Secondary) (duration) yrs. mos. days	4 days
18. Where was disease contracted If not at place of death?	
Did an operation precede death? Date of	
Was there an autopsy? no	
What test confirmed diagnosis? usual	
(Signed) D. F. Daley M.D.	Sept 20 1928 (Address) Kingston
*State the DISEASE CAUSING DEATH, or 10 deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)	
19. PLACE OF BURIAL, CREMATION OR REMOVAL	DATE OF BURIAL
Holy Trinity Georgetown	Sept 27 1928
20. UNDERTAKER	ADDRESS
Charles J. Lagunas	Georgetown

MEDICAL CERTIFICATE OF DEATH	
16. DATE OF DEATH	Sept 24 1928 (Month) (Day) (Year)
17. I HEREBY CERTIFY. That I attended deceased from Sept 24 1928 to Sept 24 1928 that I last saw him alive on Sept 24 1928 and that death occurred, on the date stated above, at 3:50 p.m. The CAUSE OF DEATH was as follows: Tetanus (duration) yrs. mos. days	
CONTRIBUTORY (Secondary) (duration) yrs. mos. days	Vaccination on left arm
18. Where was disease contracted If not at place of death?	
Did an operation precede death? no	
Was there an autopsy? Not necessary	
What test confirmed diagnosis?	
(Signed) D. W. Leach, Coroner	Sept 24 1928 (Address) York, Pa.
*State the DISEASE CAUSING DEATH, or 10 deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)	
19. PLACE OF BURIAL, CREMATION OR REMOVAL	DATE OF BURIAL
Greenmount Cem.	Sept 25 1928
20. UNDERTAKER	ADDRESS
A. F. Collier	York, Pa.

MEDICAL CERTIFICATE OF DEATH	
16. DATE OF DEATH	Sept 22 1928 (Month) (Day) (Year)
17. I HEREBY CERTIFY. That I attended deceased from Sept 18 1928 to Sept 22 1928 that I last saw him alive on Sept 22 1928 and that death occurred, on the date stated above, at 3:50 p.m. The CAUSE OF DEATH was as follows: Tetanus (duration) yrs. mos. days	
CONTRIBUTORY (Secondary) (duration) yrs. mos. days	4 days
18. Where was disease contracted If not at place of death?	
Did an operation precede death? Date of	
Was there an autopsy? no	
What test confirmed diagnosis?	
(Signed) J. M. Gross M.D.	Sept 23 1928 (Address) York, Pa.
*State the DISEASE CAUSING DEATH, or 10 deaths from VIOLENT CAUSES, state (1) MEANS AND NATURE OF INJURY, and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL. (See reverse side for additional space.)	
19. PLACE OF BURIAL, CREMATION OR REMOVAL	DATE OF BURIAL
Salmon Church	Sept 23 1928
20. UNDERTAKER	ADDRESS
Harry Quichel Dower	York, Pa.

FATAL SERUM REACTION

Ferguson cites the case of a boy of 6 years who was given 3 minims (0.18 cc.) of tetanus antitoxin because of many deep abrasions covered with street dirt as a result of a car accident. The antitoxin was given at 3:05 p.m. * * * At 3:30 the patient suddenly began to have trouble getting air into the lungs and would not breathe, although the passage was free. The chest was held in a tightly contracted state of full inspiration.

Artificial respiration was begun. * * * At 3:30 a large weal was noticed at the site of the intradermal injection of the tetanus antitoxin. The whole flexor surface of the forearm from the wrist to the elbow was reddened and edematous. The pulse was become irregular. * * * The patient began to take spontaneous breaths of a forced inspiration-al character and at 3:50 respirations were beginning to be of a more normal character. Large quantities of frothy, blood stained fluid began to pour from the lungs. * * * Oxygen was being administered continuously through the endotracheal catheter.

At 5:30 the patient suddenly stopped breathing and could not be revived. Death was considered to be due to anaphylaxis. The postmortem diagnosis after necropsy was serum reaction (accelerated) with pulmonary edema.

The Journal of the American Medical Association, December 28, 1940

PETITION TO THE PRESIDENT

CASE No. 8



JAMES LOUIS MURRAY

JAMES LOUIS MURRAY, son of James T. Murray, Glen
Cove, L. I.

Age 6.

Vaccinated Sept. 15, vaccine "H."

Commenced to complain Oct. 3,—18 days from vaccination.

Died Oct. 10.

Diagnosed "Tetanus."

This child had no prolonged period of unconsciousness. He had convulsions and other typical symptoms of tetanus. His health is reported good prior to vaccination.

INFANTILE PARALYSIS SERUM

The best informed authorities on the subject, including Dr. Josephine Neal and Dr. William Parks of the New York City Health Department Research Laboratories, have unequivocally condemned the serum on the basis of accumulated data. They pronounced it to be of questionable value and actually injurious when used in certain manners. As early as 1929 Dr. Josephine Neal had pointed out in her publications the danger of the use of the serum in poliomyelitis, and had condemned it in no uncertain terms. All the cumulative evidence pointed to the fact that this supposed "cure" exploited by the Academy was both worthless and injurious.

Dr. Williams, himself, characterized the use of this serum at a hearing of the Board of Censors of the New York County Medical Society of March 11, 1932, as a "clinical study", or experiment on humans, undertaken by the Committee to prove or disprove the value, or lack of value, of the serum.

At a discussion before the Society of Medical Jurisprudence on October 12, 1931, Dr. Neal said:

"I have always opposed the use of serum intraspinally on account of the consequent meningeal irritation that so often follows . . . sometimes with disastrous results."

Dr. Sobel, an eminent pediatrician, confirmed Dr. Neal's statement in the following words:

"If the truth were told about the use of the serum intraspinally, I am afraid that some sad stories would come out. I have some good reason to believe that several deaths have occurred as a result of its use in this way, and while names such as status thymolymphaticus have been used for the cause of death, it has been more directly attributable to meningeal irritation than anything else."

The concurring statements of Dr. Neal and Dr. Sobel make it clear that it is widely known in the medical profession that it is a common expedient of the medical-social trust in its exploitation of public health to falsify records to make them show results desired by them. In this manner they often hide from the public the sacrifice of human life that results from their activities.

- o -

The case of Marvin Zanger illustrates the danger of the serums. The story is best told in a letter by his mother, Mrs. Diana Zanger 1025 Gerard Avenue, under date of November 28, 1931, from which we quote: (See page 60)

PETITION TO THE PRESIDENT

CASE No. 19

BELLE HINMAN, daughter of Prof. M. C. Hinman, Tully,
N. Y.

Age 7.

Vaccinated July 25, vaccine
"H."

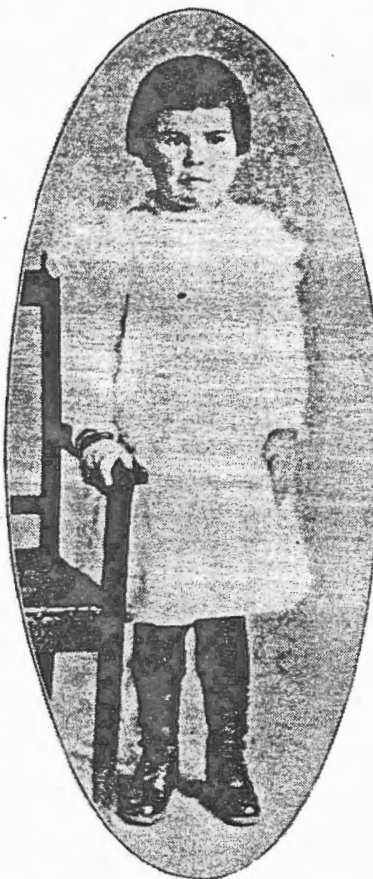
Commenced to complain Aug.
7,—12 days from vacci-
nation.

Died Aug. 10.

First diagnosis, "Acute Indi-
gestion."

Final diagnosis, "Cerebro-
spinal Meningitis."

This little girl was also in perfect health and unusually well developed for age, both physically and mentally. She complained of feeling ill on Aug. 7 with symptoms indicating a digestive disturbance. The local physician called it acute indigestion. She soon lapsed into unconsciousness and never rallied. Expert counsel was called and case pronounced cerebro-spinal meningitis. A lumbar puncture disclosed in spinal column a clear fluid under normal pressure. Cultures were sterile; intra-spinal injection of the Flexner serum without beneficial effects. Paralysis was extensive, involving the throat; breathing labored and death due to respiratory insufficiency. Temperature elevated during entire illness. All symptoms were so exactly parallel to those of Cases 24 and 25 as to warrant the suspicion that this, too, was infantile paralysis.



BELLE HINMAN

"On August 19, my boy, nine and one-half years old, became ill . . . We took him to the Morrisania Hospital at 168th Street and Walton Avenue, the Bronx. While admitting my boy who was so, so very ill, I was told that it was necessary to use serum and it would cost twenty-five dollars. I'm an American woman, and had been reading the paper, but had never noticed a fee for serum mentioned. I spoke of this to one of the doctors and he informed me there was a charge for it at all times. Of course, being a mother and so frightened, I borrowed the twenty-five dollars to pay for it. I sat with my dear child for three hours before Dr. _____ (an agent of the New York Academy of Medicine) came . . .

"My child died anyway. I have not been able to write you before this, as my heart is broken."

Another equally tragic case was related by another mother who wrote to Mrs. Zanger:

"Several weeks ago, I read in the New York American about your suit against the New York Academy of Medicine for the loss of your child from infantile paralysis.*

"Your sufferings find an echo in my heart, for I am also an unfortunate mother who lost a four-year-old son. I have a daughter aged twenty in the hospital, who is a sufferer from the same dreadful scourge.

"My boy was running around well in the hospital until the serum was administered. He died within five days.

"My daughter was paralyzed following the serum. She is in the hospital for the past seven months. God, if I could only lose my memory completely!"

* The suit brought by Mrs. Zanger for the death of her child was settled by the parties out of court.

From "Your Life is Their Toy"
Emanuel M. Josephson, M.D.
Pub. by Chedney Press, New York City

- o -

George Starr White, M. D., F.R.S.A., London, Los Angeles, Calif.:

"Take all the profit out of the manufacture and administration of vaccines and serums, and they would soon be condemned even by those who are now using them. Sanitation and hygiene are the only preventives of any disease, and the sooner people wake up to this fact and kick out the 'scientific' fanatic and the political doctor, the better it will be for them, their families, and their livestock."

PETITION TO THE PRESIDENT

CASE No. 24



WILBUR DOYLE

WILBUR DOYLE, son of Ivan Doyle, New Woodstock, Madison County, N. Y.

Age 8.

Vaccinated Aug. 28, vaccine "E."

Commenced to complain Sept. 9,—11 days from vaccination.

Died Sept. 14.

Diagnosis, "Infantile Paralysis."

This boy became unconscious Sept. 9. Temperature nearly 106. Kidneys involved; necessary to use catheter. Temperature dropped to about normal for few hours. General paralysis appeared. Throat paralyzed Sept. 13. Could not swallow. Temperature again became extremely high, reaching 107.4 rectal at 3 A.M. on the 13th. Remained unconscious until death, which occurred at 10:35 P.M. Sept. 14.

Note. The make of vaccine virus used in the different fatal cases shown herein is indicated by the Code letters "E" and "H." E indicates the virus made by the Mulford Company of Philadelphia, and H the virus made by Parke Davis & Company of Detroit. These were the two manufacturers whose virus is officially alleged to have caused the epidemic of Foot and Mouth Disease in 1908. See page 99.—C. M. H.

PHYSICIANS SAY --

"Vaccination is not always a harmless procedure; it must be looked upon as the *PRODUCTION OF AN ACUTE INFECTIOUS DISEASE*." --Dr. Milton J. Rosenau, formerly Harvard faculty member.

"This is *blood assassination*! This amazing act is the homicidal insanity of a whole profession." --Dr. J. Garth Wilkinson, London, author of medical books.

"A grotesque superstition -- without a leg to stand on!" --Dr. Charles Creighton, London, author of "Vaccination" article, 9th edition Encyclopaedia Britannica; "Vaccinal Syphilis", etc.

"It is unwise for the physician to force the operation (vaccination) upon those who are unwilling, or to give assurance of absolute harmlessness! We should not bring the art of medicine into disrepute by quack-like promises." --Sir William Osler, M. D., "Father of Modern Medicine".

"Every vaccination is a *vivisectional experiment on the human subject*; no one can foretell the result!" --Dr. F. Mason Padelord, author of "Origin, History and Results of Vaccination".

"Compulsory vaccination is *compulsory blood poisoning*." --Dr. Geo. W. Reid, Worcester, Massachusetts.

"It is *NATURAL* immunity that protects us from disease." --Dr. Perrin T. Wilson, Cambridge.

"The crime against the child." --Charles M. Higgins, New York.

"Scientifically, it cannot be disputed that from every point of view the injection of virus capable of multiplying in the body of the individual is bad . . . It may, of course, be argued on statistical grounds that the likelihood of bad effects after smallpox vaccination is infinitesimal and not worth consideration, but is this really so? It has recently been shown that nervous disabilities (meningo-encephalomyelitis (sleeping sickness), etc., may follow vaccination either as a direct effect or as a sequel to the lowering of the general resistance of the body -- Who knows for how long an attenuated bacillus can lie dormant and then assume its former virulence? --James McIntosh, M.D., Professor of Pathology, University of London and Director of the Bland-Sutton Institute of Pathology, Middlesex Hospital.

"In some of the small local outbreaks of smallpox (London, only vaccinated persons have been attacked." --Sir William Collins, M. D.

"Let no deluded mother imagine that her baby's life is made safer by the hecatombs of harmless living things offered to the false god of serology. If she will only look a bit into the record of the death-toll of antitoxins, vaccination, etc., from children's lives, she will learn that in defending even guinea pigs from torture, she is defending babies' lives also." --Annie Riley Hale in "These Cults".



Mary Louise Thoma*

17 Years Old

VACCINATED July 14, 1934, as a requirement to enter SIMMONS COLLEGE. Healthy, unvaccinated students are not admitted. Became seriously ill the following day. Rallied. Later went into a coma. Taken to Emerson Hospital.

DIED August 3rd, 1934. Death certificate reads: "INFANTILE PARALYSIS." A common sequence of Vaccination. When vaccination is the cause or "a contributing cause of death," our law does not require that it shall so appear on the death certificate. Since such a law was passed in England, many death certificates record Vaccination as the cause of death.

"We are told the virus was 'too fresh'," said Mrs. Thoma; adding, "The doctor took care to get 'fresh' virus; we do not blame the doctor who vaccinated her. Our daughter would be alive and well, today—if she had not been compelled to be vaccinated to enter college."

The doctors say, as usual, that Vaccination had nothing to do with this young girl's death. Yet, they admit the virus was "too fresh."

They say, "It didn't take"—Her parents claim—"It took her life."

*Cambridge, Mass.

STATE VIRUS

Citizens Committee
Opposing Compulsory Vaccination

11 Beacon Street, Room 412

Boston, Mass.

Tel. LAFayette 9275

VACCINATION

Alfred Pulford, M. D., Toledo

I challenge any "health" officer, judge, educator, or editor to give one valid, logical, sane and intelligent reason or excuse why vaccination should be made compulsory, why a parent should be unmercifully persecuted for refusing the evil rite for his child, or why a child should be compelled to submit to that *UNSPEAKABLE RITE* before it may enter a public school. Really is there any valid reason for such an act? If not, just how can such men as mentioned above, stoop to degrade themselves in helping to seek legislation to compel that act if not alone for the *GRAFT* (profit) that accrues from it? We can hardly class such men as ignorant! But they either do not read, or know how to read. * * *

Take the graft out of the rite and make the vaccinators and serum producers financially and legally responsible for the injuries and deaths accruing therefrom and you would immediately get its real value. The uninformed public really feels that the supposed "protection" to this most maligned and easily curable condition, that medical ignorance has shown it does not know how to control, will outweigh any serious results that are bound to follow the rite, which evil results *do not always follow immediately*, as for instance, *infantile paralysis, cancer, etc.* Those conditions are always blamed onto something else, in order to save the face of vaccination. * * *

It has been conclusively proven that the vaccine virus used in the "prevention" of smallpox, *must contain syphilis*, if the sore is to be effective. It has also been proven that "the scar left by vaccination is *analogous to syphilis*, and not to that left by smallpox". What intelligent being would trade a simple condition such as smallpox for a dose of syphilis that is a persistent body destroyer!

The "Truth Teller" - August, 1939

- o -

Dr. Creighton shows how Jenner fooled the great majority of the medical profession, when he writes:

"Jenner having succeeded in passing off his doctrine that cowpox is smallpox of the cow, it occurred to some person (Dr. Birch, I believe) about 40 years after, to prove the doctrine by experiment, the proof being to variolate the cow on the udder (i.e., to infect it with smallpox). At Attleborough, Mass., in 1836, smallpox was inoculated on a cow's udder, and the product used to vaccinate about 50 persons. The result was an *epidemic of smallpox*, a panic, and the suspension of business."



WILLI LUTTERLOH,

Hanover, age 1 year and 9 months.
Vaccinated on September 21, 1908;
died October 18, 1908.

The two pictures show the child
BEFORE and AFTER vaccination.

DEATH BY THE SERUM ROUTE

by Herbert M. Shelton

Dr. Herman Berkowitz, in whose office ten-year-old Margaret Burke, of No. 696 Humboldt Street, Brooklyn, died Saturday after he had inoculated her against scarlet fever, was seen in his office at No. 98 Norman Avenue, Brooklyn, yesterday.

He said:

"Her death was caused by an *anaphylactic reaction*. Such a reaction occurs about once in a million times.

"I used the standard serum for scarlet fever. I took all the usual precautions. When she became ill, I called in neighboring doctors. We used a pulmotor for half an hour."

The above appeared in the New York American, for May 31, 1926. Little Margaret Burke was not sick. She had not been sick. There was no reason to think that she was going to be sick. One of her little playmates had developed scarlet fever. Her parents, deluded by the ancient myth of contagion and by the persistent stream of false and misleading propaganda for serums and vaccines which pours forth from our state and municipal health (?) boards, the public health (?) service, medical societies, serum manufactures, etc., took her to their physician to have her "immunized" against scarlet fever.

Result: She was carried out of the doctor's office *a few minutes later in a coffin*. Her death certificate gives as the cause of her death, ANAPHYLAXIS. *They killed her to save her*. She was just one more of the millions of victims of medical ignorance and commercialism.

While in conversation, recently, with a very prominent serum squirter, here in the East, he told me that he had known of cases where chiropractors had injured patient's spines. And occasionally a heavy-handed chiropractor does punch somebody a bit too hard, but the whole Chiropractic profession couldn't do as much injury with Chiropractic as ten physicians armed with vaccines and serums can do. Besides, there are no laws to force us to submit to spine punching. We can take it or leave it; we can do our own choosing. No one bullies, coerces, or compels us.

Thus, in urging and forcing inoculations upon everybody, for almost every form of disease, boards of health (?), physicians and serum manufacturers are paving the way for greater evils than those they pretend to be fighting. Besides this, they are laying the foundation for numerous degenerative diseases in those who do not die of serum poisoning. I am fully convinced that the practice of medicine in all its branches is the biggest cause of disease, degeneracy and death in modern life.

The "Golden Age", April 17, 1929

HORRORS OF VACCINATION

CASE No. 2



FREDERICK W. BOHMWETCH

FREDERICK W. BOHMWETCH, son of F. J. Bohmwetch,
308 Eighth St., Watkins, N. Y.

Age 10.

Vaccinated Aug. 5.

Commenced to complain Aug. 29,—24 days after vaccination.

Died Sept. 2.

Diagnosis, "Tetanus."

Complained first of stiff neck and arm. Aug. 30 diagnosed as lockjaw. Three thousand units antitoxin administered. Grew rapidly worse. Convulsions appeared at 3 A.M., Aug. 31. At 9 A.M., 10,000 units antitoxin administered; again at 9 P.M. Head and back drawn back so that three pillows were necessary under small of back. More antitoxin administered Sept. 1. Unconscious at noon. Died Sept. 2.

Startling Medical Admissions Concerning Vaccination, from an Editorial of the "London Lancet", England's leading medical journal, raise the question of the desirability of abandoning universal vaccination as a public health measure:

"Failure to control smallpox in the North of England has brought the policy of universal pseudo-compulsory vaccination into further disrepute . . . It is a mistake to suppose that all the opposition is due to lack of imagination or crankiness.

"Vaccination at the age of six months *inflicts an infectious disease* on the child at a time when its digestive mechanism is being rapidly modified, and many reasonable people, although convinced that vaccination will prevent smallpox, think that the advantages of immunity do *not* outweigh the disadvantages of its production.

"There is enough sense in the opinion . . . to make universal and full vaccination of infants (as theoretically enforced by Parliament) impracticable in this country at the present time."

VACCINE MORE DANGEROUS THAN SMALLPOX

From Presidential Address by Dr. J. W. Carr, before the Medical Society of London, published in The Lancet (London), Oct. 13, 1928:

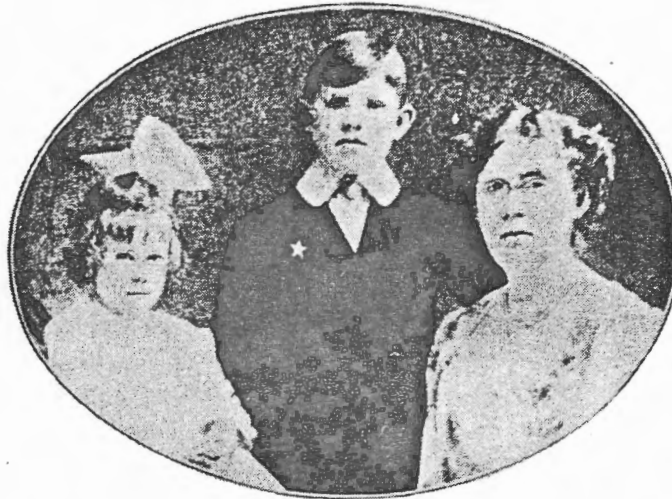
"An exceedingly mild form of smallpox has now been epidemic in this country for several years; ought we not seriously to consider whether a disease which causes such slight constitutional disturbance, such an almost inappreciable number of deaths, and so few, if any, after-results, really calls for the elaborate and most expensive system of hospital isolation which we maintain for it, especially as we are told that in some districts it is considered preferable to have a pleasant three weeks in hospital with smallpox than to suffer from vaccination at home? Also, if the disease is really not more serious than chickenpox, let us treat it accordingly and not try to prevent it by giving another disease which may cause as much, or more, constitutional disturbance, and in some cases as long, or even a longer period of incapacity for work.

"The results of vaccinia are not absolutely negligible, and unfortunately, whilst the number of deaths from smallpox is now certainly much overstated, there is a possibility that those from vaccinia may be understated. Moreover, it is now recognized that in a certain number of cases recently, the vaccination of children *previously perfectly healthy* has been followed by an obscure condition of encephalomyelitis which not uncommonly proves fatal."

From "The Facts Against Compulsory Vaccination" by H. B. Anderson

HORRORS OF VACCINATION

CASE No. 25



LEWIS FREEBORN LOYSTER

LEWIS FREEBORN LOYSTER, son of James A. Loys
Cazenovia, N. Y.

Age 11.

Vaccinated Aug. 29, vaccine "E."

Commenced to complain Sept. 10,—11 days from vaccinati

Died Sept. 21.

Diagnosed "Infantile Paralysis."

This boy was the picture of health. To quote the attending physician he was "a splendid specimen" physically. On the night of Sept. 1 he had a bad headache. The next morning at six was no better. At ten he was found by his mother unconscious. He was very constipated, slightly nauseated. Vomited once. Examination of urine showed casts in considerable quantities. The initial diagnosis was acute indigestion. Blood examined and found normal except for an excess of white corpuscles, explained as a natural sequence of vaccination. Unconsciousness continued. On Sept. 13 lumbar puncture made. Fluid from spinal cord not under pressure; perfectly transparent, subject to microscopic and culture tests; proved absolutely sterile. Case diagnosed as infantile paralysis of the cerebral type. Temperature very high, ranging from 104 to 106 rectal. About Sept. 14 throat became paralyzed. For days could not swallow a drop. Food administered through rectal medicine hypodermically. Paralysis of right leg and arm appeared about Sept. 17. Lungs filled with thick mucus. Respiration labored. Slight cyanosis. Small amount of oxygen administered continually. Sept. 16. Death occurred at 10:10 P.M. on Sept. 21 from paralysis of respiratory muscles. Temperature about 107 at death. Microscopic examination of spinal cord after death confirmed diagnosis as infantile paralysis.

THE LOYSTER CASE

James A. Loyster*, Cazenovia, New York, father of the boy whose picture and sad history appear on the preceding page, had always believed in vaccination. Even the death of his son did not entirely shake his faith in the practice. But it did prompt him to make an *investigation* of the serum factory where the serum was made, and when he found that everything possible had been done to produce pure vaccine virus, he began an investigation of the results of vaccination in New York State that year, 1914.

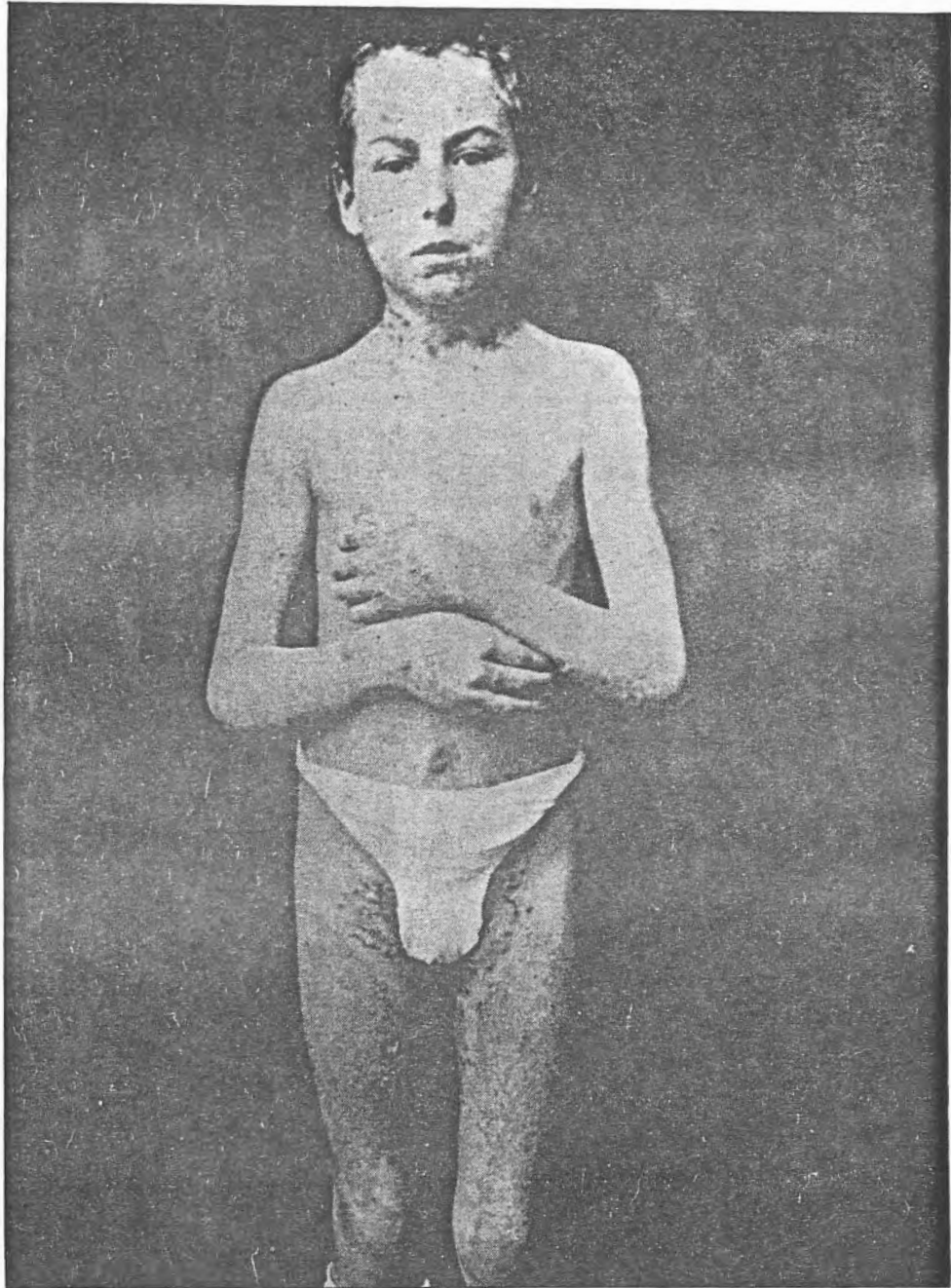
Mr. Loyster sent out 500 requests to newspapers throughout the state for information of fatal and serious cases resulting from vaccination. He did not include New York City or Buffalo, and made little attempt in Rochester, Syracuse or Albany, because of the difficulty in making a canvass in great cities. He received 230 replies which gave the names of 27 children who had died subsequent to vaccination and of nearly 100 who had been made seriously ill, crippled, or deformed for life. He then proceeded to carefully verify these statements through parents, physicians, and those conversant with the cases. He found physicians reluctant to give details; in no case could he get any information from hospitals.

Faced with this appalling evidence of the evil effects of vaccination, Mr. Loyster published at his own expense a pamphlet in memory of his son, summarizing the information gained through his investigation. In it he included the case histories and, when possible, the pictures of the more than 50 victims of this practice, together with the following conclusions:

1. That vaccination caused, directly or indirectly, the death of over 50 children in rural and suburban districts of New York State in 1914, as well as leaving an appalling train of illness.
2. That the cost in illness and destruction of child life was entirely out of proportion to the amount of protection against smallpox attained or needed.
3. That vaccination of children is wrong in principle, not in harmony with the trend of the best medical practice, and should be abandoned.
4. That there was an overwhelming and rapidly growing sentiment against compulsory vaccination.
5. That the Department of Education should be free from the entangling alliances with the Department of Health; that compulsory vaccination as a pre-requisite for an education should be done away with.

Mr. Loyster made a trip back to New York State from Florida in February, 1915, expressly to appear before the Health Committees of the Senate and Assembly at a public hearing on the Jones-Tallett Bill to amend the school vaccination law.

* Loyster was a newspaper man, a Republican leader in New York Legislature, and head of the Globe Ticket Company in Philadelphia.



13. School boy Arthur Smith, Jr., eleven years old. Vaccinated September, 1914, photographed August, 1915. Eruptions similar to foot and mouth disease appeared a few weeks after vaccination and continued intermittently for over three years! Photograph shows a mild stage of these eruptions, which were

WHAT DO MEDICAL MEN SAY VACCINATION IS?

"I consider vaccination to be one of the greatest humbugs ever on human beings." --Dr. John Stewart

"In very truth, implanting the seeds of disease." --Dr. Edward Ballard

"The infliction of a disease transferred from the brute." --Dr. C. T. Pearce

"Quackery by act of Parliament." --Dr. E. Haughton

"A blunder in poisons." --Dr. C. M. Nichols

"A ghastly risk." --Dr. Allinson

"A gigantic delusion -- never saved a single life." --Dr. J. W. Hodge

WHAT ARE THE EFFECTS OF COWPOX AND VACCINATION?

Dr. E. Jenner, the originator of vaccination:

"Absorption takes place, and tumors appear in every axilla. The system becomes affected, the pulse quickened, and shiverings with general lassitude, and pains about the loins and limbs, with vomiting, come on. The head is painful and the patient is now and then afflicted with delirium."

(Editor's Note: It is of interest to note that the members of Jenner's family died of tuberculosis.)

The Ven. Archdeacon Colley:

"It mingles in a hideous communion of blood all the diseases and taints of the community. Every hereditary sewer is made to open up in the nursery. It pours every disease and sifts every lust and ventilates every uncleanness through the fragile bodies of our little children. How can we be silent in view of the terrible evil forced upon us by law?"

DOES VACCINATION AFFORD ANY PROTECTION?

Professor Crookshank:

"Inoculation of cowpox does not have the least effect in affording immunity from the analogous disease in man, syphilis; and neither do cowpox, horsepox or sheep pox, cattle plague, or any other radically dissimilar disease, exercise any specific protection power against human smallpox. Inoculations of cowpox, horsepox, and cattle plague have totally failed."



**Benjamin F. Olewine, Altoona, Pa.
SAVED FROM SMALLPOX BY VACCINATION.**

Benjamin F. Olewine, Altoona, Pa. Vaccinated in winter of 1895, being then in good health and smooth and clean of skin. About two months later a sarcomatous tumor began to develop where the sore had not yet healed properly. The tumor continued to grow and spread until it reached the enormous proportions shown in cut, which was made from a photograph. "Racked with intense pain and untold misery, suffering the most excruciating torments conceivable, the poor man was relieved only by laying down his life as a sacrifice on the altar of stupid indifference and professional incompetency." (Dr. M. A. Wesner.)

Dr. Crick:

"Vaccination never prevented a case of variola (smallpox), unless when vaccination killed the patient."

Dr. Creighton:

"At Cologne, in 1870, the first unvaccinated person attacked by smallpox was the 174th in order of time; at Bonn, the same year, the 42nd; and at Leignitz in 1871, the 225th."

Can we say from this that smallpox first attacks the unvaccinated?

"Even efficient vaccination does not guarantee perpetual protection."

Imperial Vaccination League:

"It is true that many vaccinated people take smallpox and even die from it."

Dr. Brett:

"Quite a farce. No protection whatever. I am surprised how any individual can give it credence."

DOES RE-VACCINATION PROTECT?

M. D. Lon:

"I myself contracted smallpox after being vaccinated three times."

Dr. Blakewell, formerly Vaccinator General for Trinidad:

"Personally I contracted smallpox less than 6 months after a severe re-vaccination."

Dr. Stramm, Medical Staff, Prussian Army:

"I myself have been vaccinated and twice successfully re-vaccinated, and yet I have been attacked with smallpox in the most virulent confluent form."

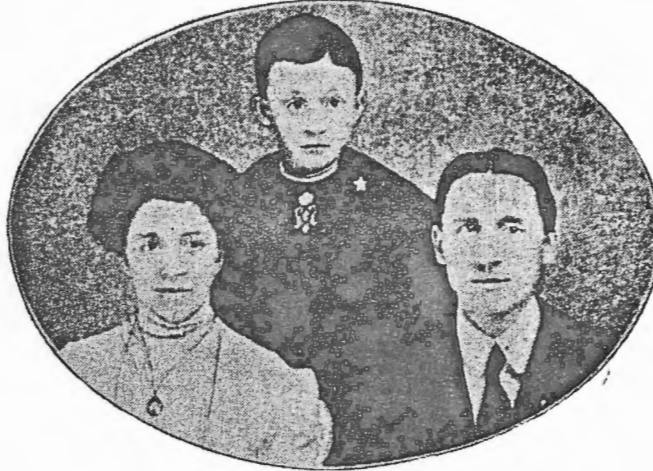
Dr. Lippincott, Chief Surgeon, U. S. Army in the Philippines:

"No other army was ever so thoroughly looked after in the matter of vaccination as ours. Vaccination and re-vaccination went on as regular as the drills."

(--Yet the official report showed in 1899, 267 cases of smallpox with 78 deaths; in 1900, 246 cases with 113 deaths; and 1901, 125 cases with 37 deaths, the fatality for the year 1900 being the highest ever recorded from smallpox in any army.)

PETITION TO THE PRESIDENT

CASE No. 3



REGINALD SIDNEY SUMSION

REGINALD SIDNEY SUMSION, only son of Geo. Sumsion,
Gloversville, N. Y.

Age 12.

Vaccinated Aug. 11 with vaccine "E."

Died Sept. 11.

Diagnosis, "Tetanus."

This boy was "splendidly healthy." Never sick except with usual children's diseases, until vaccinated. First complained that the back of his neck and jaw were stiff. On the 7th could not walk. Convulsions appeared. Antitoxin administered. Removed to hospital. Convulsions continued very severe. Chloroform administered. Convulsions continued through the 7th and 8th. Very weak on afternoon of 9th. Oxygen administered at 6 P.M. Died 6:45 A.M., Sept. 11. No abrasion of any kind found on body except vaccination wound.

DOES VACCINATION MITIGATE?

Dr. A. M. Ross:

"Forty years' practice has convinced me that vaccination does not afford the least protection or mitigation against smallpox."

Dr. J. A. Erskine Stuart, L.R.C.S.:

"Persons are in many cases severely marked who have been successfully vaccinated."

Dr. Davidson:

"If they (vaccination scars) teach anything, it is that the more you have of them, and the larger and deeper they are, the more severe will be your smallpox."

WHAT DOES VACCINATION DO?

Dr. Pigeon:

"Vaccination is liable to produce smallpox; it predisposes to this disease and renders it more serious. Vaccination predisposes to typhoid fever, diphtheria, meningitis, etc. Vaccination is a powerful factor in the debility and degeneration of the race."

Dr. J. W. Hodge:

"The human race, while groaning under the previous burden of its own diseases, is having added to its stock the diseases of the brute creation . . . corpse lymph from human cadavers (corpses) and diseased calves is making millionaires of vaccine manufacturers and corpses of our children."

Dr. Hycheman:

"I have recently dissected more than a dozen children whose deaths were caused by vaccination, and no smallpox, however black, could have left more hideous traces."

The Rt. Hon. Eugene Wason, K.C.M.P.:

"Had himself seen a young child who had been vaccinated suffering in the most terrible way. There were holes in his legs and ulcers in his mouth."

Dr. Beany told of a handsome child whose joints became diseased and enlarged, and whose teeth sockets rotted away and ulcers formed in various parts, after vaccination.

PETITION TO THE PRESIDENT

A resident at East Finchley sent the following particulars to the Anti-Vaccination League of London:

"Mr. Nichols had been a Territorial for about eight years, and as a boy was intended for Sandhurst College, but circum-



FIG. 16. Sergeant H. Nichols, of East Finchley, England, died on November 4, 1914, from the effects of anti-typhoid inoculation.

stances prevented this. A keen soldier, and particularly clever at drilling recruits, he was being kept for Home Service. Understanding that inoculation was compulsory for the men, he underwent the operation as an example and encouragement.

Dr. Friedrich:

"Arms swelled to the elbows, yes, clean to the wrist joints . . . pieces of flesh as big as a dollar dropped right out."

ARE THE UNVACCINATED A DANGER TO THE COMMUNITY?

Dr. R. A. Birwood, Med. Supt. Hospital Ships, who had seen 12,000 cases of smallpox:

"The unvaccinated person is no danger to me nor my family."

Dr. W. R. Hadwen:

"What protects me? So far as I know I have never been vaccinated, yet in the epidemic in London, 1893, I was in and out among the Hospital Ships all the time."

Dr. H. V. Knaggs:

"Facts prove that the vaccinated constitute the real element of danger."

Dr. C. K. Millard, M. D., D. Sc.:

"During the ten months the epidemic lasted, 113 children (under 15 years) were attacked, infected largely by once-vaccinated adults."

DOES VACCINATION CONVEY LOATHSOME DISEASES?

Royal Commission:

"It is possible to convey syphilis."

Dr. John Epps:

"The system is unquestionably poisoned."

Dr. Wilder:

"Consumption follows vaccination as effect follows cause."

IS VACCINATION HARMLESS AND BENIGN?

Dr. L. C. Appel:

"It is impossible to discover any stuff which can be used without danger."

Dr. Hitchman:

"I have seen hundreds of children killed by vaccination."

Dr. Turnbull:

"I have seen healthy children die rotten from the effects of vaccination."

PETITION TO THE PRESIDENT

CASE No. 1



OLIVE CRAMER

OLIVE CRAMER, daughter of Fred Cramer, 22 E. State St.,
Gloversville, N. Y.

Age 15.

Vaccinated July 28 with vaccine "E."

Commenced to complain Aug. 24,—27 days from vaccination.

Died Aug. 27.

Diagnosis, "Tetanus following Vaccination."

This young woman's health prior to vaccination is reported to have been "one hundred per cent. perfect." She commenced to complain Aug. 24, and was stricken with convulsions Aug. 26. Death occurred at 11:15 P.M. on Aug. 27. She was conscious all the time except the last few hours. Jaws were locked and breathing labored. A brother vaccinated with the same tube of vaccine was so ill as to require an operation.

Dr. Collins:

"If I had the desire to describe one-third of the victims ruined by vaccination, the blood would stand still in your veins."

IS VACCINATION OF ANY USE WHATEVER?

Dr. J. Mackenzie, M. D., F.R.C.S. Inverness:

"It ought to be speedily given up; no protection whatever, rather the contrary, from injuring natural health."

Dr. Keller, Head Physician Imperial State Railways, Austria:

"Vaccination is utterly worthless."

From "What is Vaccination? What are its Fruits?"
American Medical Liberty League, Chicago

RADIO DEBATE ON VACCINATION

In a radio debate conducted under the University Forum over Station WPAP, New York, Sunday, August 16, 1931, on the subject "*SHOULD WE APPROVE COMPULSORY VACCINATION FOR SMALLPOX?*" Louis S. Siegfried, President of the Vaccination Research Association and Publisher of the Quest Magazine presented the following argument on the negative side of the Question and was declared winner by the vote cast by the radio listeners.

NEGATIVE PRESENTATION

The liberal attitude of my distinguished opponent toward the absorbing question of vaccination for smallpox deserves our highest commendation.

His consent to discuss the question with me here today will accomplish the highest of all purposes--stimulate the diffusion of healthy thought.

Let me emphasize that we bear no malice toward the individual physician, whom we believe is sincere in preaching what he was taught. We do oppose the system of exploitation and intimidation by which the questionable and many times dangerous operation of vaccination is made a condition for public school attendance in a free country.

The statistics we will offer to substantiate our contention have for the most part been culled from the literature of medical sources.

Were vaccination compulsory for the adult, he would have a measure of resistance. But, the school child is helpless to protest.

Dr. William Brady, M. D., on October 30th, 1924, in a syndicated article appearing in the Brooklyn Daily Eagle, said--

"The tricky method by which vaccination is made practically compulsory in some communities is a thing the health authorities should be ashamed of--I mean the scheme which arranges *one law to compel attendance at school and another to exclude the child that isn't vaccinated.* That's an illustration of the unworthy methods of bad public health administration. People who back such legislation are too shifty to entrust with the guardianship of public health."

The Educational Law is used as a whip to force vaccination. Those advocating compulsion must constantly be reminded that it is the school that is public and *not the child.* Obsessed with unlimited powers the vaccinators not only push compulsion, but intimidate parents to believe that other vaccine inoculations are mandatory.

We contend that the risks from vaccination are greater than smallpox. The Vaccination Inquirer -- London, England, July, 1931--reports the figures of the Ministry of Health --

"Only 94 children (under 5) in England and Wales died of smallpox in the 25 years ending December, 1929, but 243 died of vaccination."

"In the United States, according to the official reports of the United States Public Health Service--64 deaths were reported following vaccination from 1925-1928--this is ten times greater than the smallpox risk."

"American Medicine", March 1914, stated editorially: "The growing opposition to vaccination is a matter of grave concern. This new movement...is not the illogical and absurd anti-vaccinationist crusade, but is the conviction on the part of very intelligent men, that it is *useless to protect against an infection which they may never encounter.* This attitude is not confined to laymen, but is taken by those leading men in the medical profession who postpone vaccination of their own kith and kin until the last moment. Two world renowned men have confessed to us that they have had their children vaccinated only in obedience to public opinion and out of the profession...So we hear men saying that *there is not one chance in a million of their children being infected with smallpox, but that there is far more chance of a pus infection or tetanus from the vaccine.*"

Remember, I am quoting from a medical publication.

The medical profession is divided on the merits of vaccination, and we submit medical authorities to prove that vaccination is not a deterrent to smallpox--

Dr. Reece: in Volume 1, page 16, says: "In one family we lately met with seven children laid up with smallpox, all had been vaccinated."

Dr. A. Vogt, Berne University, said: "After collecting the particulars of 400,000 cases of smallpox my belief in vaccination is destroyed."

Clarence Darrow, the noted lawyer, in a letter to the speaker, on February 26, 1928, wrote--

"I have no objection to anyone being vaccinated who wants it, but I do object to compelling anyone to be vaccinated when he does not believe in it. If vaccination does what its advocates claim for it the person who is vaccinated ought to be safe no matter whether anybody else is vaccinated or not."

The commercialism behind vaccine therapy is in a great measure responsible for the keen desire to continue compulsion. Fifty-one vaccine manufacturers with an investment of over two hundred million dollars are licensed by our government for this business.

What is the cause of smallpox? Perhaps Dr. Bolker can tell you. *The germ of smallpox has not been isolated.*

With what measure of assurance can we know *what* the exudate taken from the festering sores of diseased calves will contain if the germ of smallpox cannot be seen in it?

Is it not possible to have also germs of tetanus, tuberculosis, or lockjaw in vaccine? Let Dr. Sir William Osler, in his book--"The Principles and Practice of Medicine" 1924 edition, answer our questions. He says:

"A quiescent malady might be lighted into activity by vaccination," and that "This has happened with congenital syphilis -- occasionally with tuberculosis."

We submit that the same agency--hygiene and sanitation--which have been given credit for the eradication of other filth diseases like bubonic plague, cholera, and black death, would have also vanished smallpox, *were it not for the continued infection by vaccination.*

Milton J. Rosenau, M. D.,--Dr. Bolker will verify the renown of Dr. Rosenau--Professor at Harvard, in his textbook "Preventive Medicine and Hygiene" on page 3 says:

"Vaccination, then, consists in *introducing the active principle of cowpox*--cowpox or vaccinia is an acute specific disease to which many animals are susceptible, namely, man, cattle, camels, rabbits, monkeys, guinea-pigs, rats, etc."

Smallpox, once a dread disease, is now so mild that it cannot be differentiated from chickenpox or poison ivy.

Public Health News, New Jersey, for July 1931; page 150: "Six cases of smallpox occurred among the colored residents of Newark, in April and May. The disease had existed for some weeks before a correct diagnosis was made."

If vaccination is safe, harmless, and gives immunity, why do our vaccinators and Boards of Health refuse to give a written guarantee that it will have no ill effects?

Why does a public school expel a single unvaccinated child as a menace to the others. Is it because vaccination does not protect the vaccinated?

Vaccination is a graduate of the abandoned blood letting practice founded on a superstitious milkmaid's belief and later commercialized and pushed under the pretense of public health.

Only 9 states in the United States have compulsory vaccination--4 states forbid vaccination as a school requirement.

Holland has voted for optional vaccination until 1933 in view of the many encephalitis cases following vaccination.

In England, where vaccination had its birth, after eight years investigation by a commission, vaccination was made optional in 1908 and has remained so.

About 3% of the Australian people are vaccinated. For the last 20 years there has been an average of one death in 5 years from smallpox.

NEGATIVE REBUTTAL

You have undoubtedly been impressed with the painstaking detailed description of the methods of bringing the vaccine virus from its source--the smallpox patient--its continued passage through several animals and finally the sterilized vial for application by the vaccinator.

It takes about ten days until the festering sores on the calf have developed on its abdomen. Can you conceive of an animal being held in a holster during that period and *kept spotless*?

Whether the calf and rabbits are suspended in the air or on the ground during the period of preparation, their exudate of pus is pus just the same. The addition of glycerine to make it colorless and the carbolic acid to be sure all germs or bacteria are destroyed, is the strongest indictment against vaccination. What does remain, according to Dr. Bolker, after everything is destroyed, apparently is *glycerine* and *carbolic acid* and the *carcasses of dead bacteria*. Why torture cows and rabbits for a little additional harmless fluid?

The truth of it is that *it is not harmless and is not devoid of germs*. Why? Because the vaccine must be kept at a very low temperature. The ordinary ice box is not sufficient.

Public Health Service reprint, number 1424, page 2, states: "Smallpox vaccine cannot be kept too cold, *it deteriorates even in an ice-box.*"

Dr. Bolker unintentionally, no doubt, has confused inoculation which was practiced before Jenner was born and vaccination as it is understood today. There is a difference between the two. General vaccination did not start until about 1850, and if Sweden had a death mortality of 2050 per million up to 1801; and during the period 1801 to 1810 without vaccination, the mortality dropped to 680 per million, who or what gets the credit for that reduction to 1/3?

If my distinguished opponent wishes to prove his case by citing the 6 cases in Newark as being unvaccinated, permit me to quote from one of his journals, another group of cases, Hygienic Laboratory Bulletin, No. 149--page 38--

"Of 23 negroes who had recovered from smallpox and showed definite scars, 17 were successfully vaccinated. Of these 1 was vaccinated successfully within a year, 3 between 1 and 3 years, 2 between 3 and 4 years, and 2 between 4 and 5 years after the disease."

We agree with Dr. Bolker as to his definition of a serum. But, vaccine for smallpox is emphatically not a serum.

Vaccine is the substance containing the virus of cowpox. But a serum is made in the division of blood from the solid elements. My reference is taken from Dorland's Medical Dictionary.

In conclusion, we join the immortal Alfred Russell Wallace who said:

"VACCINATION IS A DELUSION, ITS ENFORCEMENT A CRIME."

As copied from "Quest" Magazine

THE
INEFFECTIVENESS

OF

VACCINATION

AS A

"PREVENTIVE"

VACCINATION AND INOCULATION DO NOT PREVENT DISEASE

William Howard Hay, M. D., Buffalo, New York:

"We have *no real proof* of the boasted effectiveness of any form of anti-toxin, vaccine, or serum."

"Were not our boys in the army thoroughly protected? They were physically fit on admission to the army, else they could not have got by the examining boards; they were thoroughly, very thoroughly immunized against typhoid fever, Meningitis, Pneumonia, Influenza, yet they died like flies, not on the firing line, but right here at home, in the concentration camps, where they were surrounded by the finest sanitary precautions that science could devise, and not only did they die, but they died of the very disease they were supposed to be *immunized* against."

"Is it any wonder the public is getting a little suspicious of us and our vaunted 'discoveries'? The wonder to me is that there are still millions of them willing to submit to vaccination and serum treatment."

"The true figures on vaccination for smallpox have never got before the public, though they can be seen in the files of the various departments of the Army as well as the Government, if one cares to ask for them. *If the record of vaccination in the Philippines alone were ever to become a matter of general knowledge it would finish vaccination in the whole country*, at least among those who are able to read and think for themselves. After three years of the most rigid vaccination, when almost every little brown man had been vaccinated from one to six times, there occurred the severest epidemic of smallpox that the Islands had ever seen, with a death rate running in places to almost seventy percent, and in all, well over sixty thousand deaths."

P. L. Clark, M. D., Chicago, Illinois, says:

"I hope to see the day when any doctor who so violates the laws of Nature as to put directly into the blood stream a noxious, virulent poisonous nitrogenous fluid will be put in jail, and I am going to do all I can in enlightening people to see that brought about. The administration of toxin-anti-toxin and the Schick test on children is *useless, criminal and little short of murder.*"

FROM THE RECORDS

Massachusetts had her severest epidemic of smallpox after 68 years of continuous vaccination, the last 18 of which were *COMPULSORY!* This epidemic occurred among people the doctors proudly boasted as "completely vaccinated"! (1873-74). Thousands had it and hundreds died of it, according to the reports. This caused a lull in the boasting among the vaccinating doctors for a while.

STATE HOUSE HEARING

Revealed two memorable facts: A young Harvard Medical School graduate - vaccinated NINE times in succession - because the first eight "didn't take" - died of Confluent Smallpox after the NINTH vaccination-- in the Smallpox Hospital!!!

At the same Hearing, by way of contrast:

A nurse (Dr. Hale's Aunt), called the "Boston Smallpox Nurse" testified that she had taken care of more than a hundred smallpox patients of all kinds from mild to "confluent" and had no fear of smallpox. She had never been vaccinated, and nothing could persuade her to be, she had seen such terrible results from it.

Bulletin 8512 issued by the Surgeon General of the United States, states that one soldier out of each 5,000 contracted smallpox in the World War. --They were supposed to be protected. While during the same period our civil population had one case of smallpox to 40,000. Would you call that immunity?

VACCINATED PERSONS ACQUIRE SMALLPOX MORE READILY THAN UNVACCINATED

During the last great smallpox epidemic in New York City in 1901 and 1902, the City Department of Health issued a printed circular to doctors, dated in 1902, which clearly acknowledged that the majority of all cases in this epidemic occurred in persons who had been successfully vaccinated a few years previously, and not in unvaccinated persons. This statement was signed by Dr. Ernest J. Lederle, Commissioner of Health and Dr. Herman M. Bigg, Chief Medical Officer.

Despite rigid vaccination laws, in the epidemic in Germany in 1817 there were 4000 cases of smallpox - all vaccinated that year.

VACCINATED PATIENTS ILL WITH SMALLPOX

Wm. Blackwood, M. D., of Philadelphia, who saw four thousand vaccinated smallpox patients in the Municipal Hospital in that city, says:

"The indiscriminate vaccination of school children, with little or no regard for their state of health, heredity and living conditions, is really a very serious evil, and is costing many more lives than you can get any idea of from the occasional accounts published in the newspapers. Cancer experts have again and again called attention to the *peril of inoculating human beings with organisms having a more rapid growth than normal cells of the human tissues.*"

He remarks further that these cells may go to all parts of the body and set up disease.

HOSPITALIZATION FOR VACCINATION

The Report of the Surgeon General of the Army, 1919, Vol. 1, p. XXXVIII, gives the number of admissions to hospitals during the year 1918 on account of vaccinia, the diseased conditions resulting from vaccination, as 10,830.

The report of the Surgeon General of the Army gives the number of admissions to hospitals during 1917 on account of vaccinia and typhoid vaccination combined as 19,608.

Dr. Edgar M. Crookshank:

"I maintain that where isolation and vaccination have been carried out in the face of an epidemic it is isolation which has been instrumental in staying the outbreak, though vaccination has received the credit. Unfortunately a belief in the efficacy of vaccination has been so enforced in the education of the medical practitioner that it is hardly probable that the futility of the practice will be generally acknowledged in our generation, though nothing would more redound to the credit of the profession and give evidence of the advance made in pathology and sanitary science."

Dr. Edgar M. Crookshank was professor of Pathology and Bacteriology of King's College, London, England, and was writer of one of the greatest works in the English medical literature, "History and Pathology of Vaccination", London, 1889, which consists of two large volumes, profusely illustrated, with early records of vaccination failures from Jenner.

NATURAL IMMUNITY PROTECTS

Surgeon J. P. Leake, in an article published in "Public Health Reports", the Weekly Bulletin of the United States Public Health Service, January 28, 1927:

"Will a non-immunized person contract smallpox if exposed to the disease? By no means uniformly. Exposure to smallpox, especially to the milder forms, without contracting the disease, frequently occurs and is no definite evidence of immunity. The number of cases of smallpox among the unprotected persons in contact with patients suffering from the disease is very much less than 100 percent . . . "

SANITATION A VITAL FACTOR

Dr. C. Killick Millard, Medical Officer of Health for Leicester, England, in book entitled "The Vaccination Question", issued in 1914:

"For forty years, corresponding roughly with the advent of the 'sanitary era', smallpox has gradually but steadily been leaving this country (England).

"Accompanying this decline in smallpox there has been a notable diminution during the past decade in the amount of infantile vaccination. This falling off in vaccination is steadily increasing and is becoming very widespread."

From "Facts Against Compulsory
Vaccination", H. B. Anderson

For years the United States Public Health Service boasted of the wonderful record made in clearing up smallpox in the Philippines by vaccination. But this record has been a muted subject since 1918-19 when, after 12 years of systematic vaccination, these Islands experienced one of the most appalling epidemics of smallpox ever known, with an almost unheard of percentage of deaths in proportion to the cases.

According to the Report of the Philippine Health Service for 1918 (page 8) there were 47,369 cases and 16,477 deaths that year from smallpox. On page 24 of the Report of the Philippine Health Service for 1920 we find that there were 60,612 cases and 43,294 deaths from smallpox during 1919.

Says the *Masonic Observer*, Minneapolis, Minn., December, 1921:

"Think of it - less than 11,000,000 population in the Philippines and 107,981 cases of smallpox with the awful toll of 59,741 deaths in 1918 and 1919, and bear in mind that, in all human probability, the inhabitants of the Philippines are as thoroughly vaccinated and *re-vaccinated* as any people in the world.

"Systematic vaccination started in the Philippines in 1905 and has continued ever since. It is certain that over ten million vaccinations for smallpox were performed in the Philippines from 1905 to 1917 inclusive, and very probable that the vaccinations numbered even as many as fifteen million during that time. This can be verified by reference to reports of the Philippine Health Service."

Speaking of the 1918 epidemic, the *Observer* has to say:

"***The *highest percentage of mortality*, 65.3 percent, was in Manila, the *most thoroughly vaccinated* place in the Islands, the lowest percentage of mortality, 11.4 percent, was in Mindanao where, owing to religious prejudices of the inhabitants, vaccination had not been practiced as much as in most other parts of the Islands. To the everlasting shame of the misnamed "health" service, vaccination has been largely forced on Mindanao since 1918, in the face of this direct proof that their people were safer without it; and with the result of a smallpox mortality increase to above 25 percent in 1920.

"In view of the fact that sanitary engineers have probably done more in Manila to clean up the city and make it healthy than in any other part of the Islands, there is every reason to believe that excessive vaccination actually brought on the smallpox epidemic in spite of the sanitary measures taken to promote health.

"It is also highly significant that the statistics of the Philippine's health service show that there has been a steady increase in recent years in the number of preventable diseases, especially typhoid, malaria, beriberi and tuberculosis. Is it reasonable to believe that the very thorough campaign of vaccination and serum inoculations of various kinds is responsible in at least some degree for this? You can answer the question for yourself."

"The great smallpox epidemics experienced by highly vaccinated Germany and Japan have now been duplicated in the Philippines. How much longer will reputable physicians continue to stand sponsor for the deadly delusion that 'vaccination is a harmless method of immunizing against smallpox?'

"It is not surprising that many honest, conscientious medical men still believe in the merits of smallpox vaccination, because the truth about its dangers is carefully kept from them by those who should inform them. Neither is it surprising that some doctors who do know the truth refuse to come out openly and condemn the practice. Once the medical profession frankly admits that vaccination is a complete failure, and they will have to do it, the bottom falls out of the whole vaccine and serum theory. They are verily 'between the devil and the deep sea.'

"The medically controlled Navy and War Department of the United States still continue to offset sanitary measures taken for the protection of our soldiers and sailors and to lessen their resistance to disease by compelling our men in the service to pollute their blood with vaccines and serums. How long must we wait for heads of these departments with backbone enough to defy the medical clique and protect our men?"

Vaccination - Does Prevention Prevent?

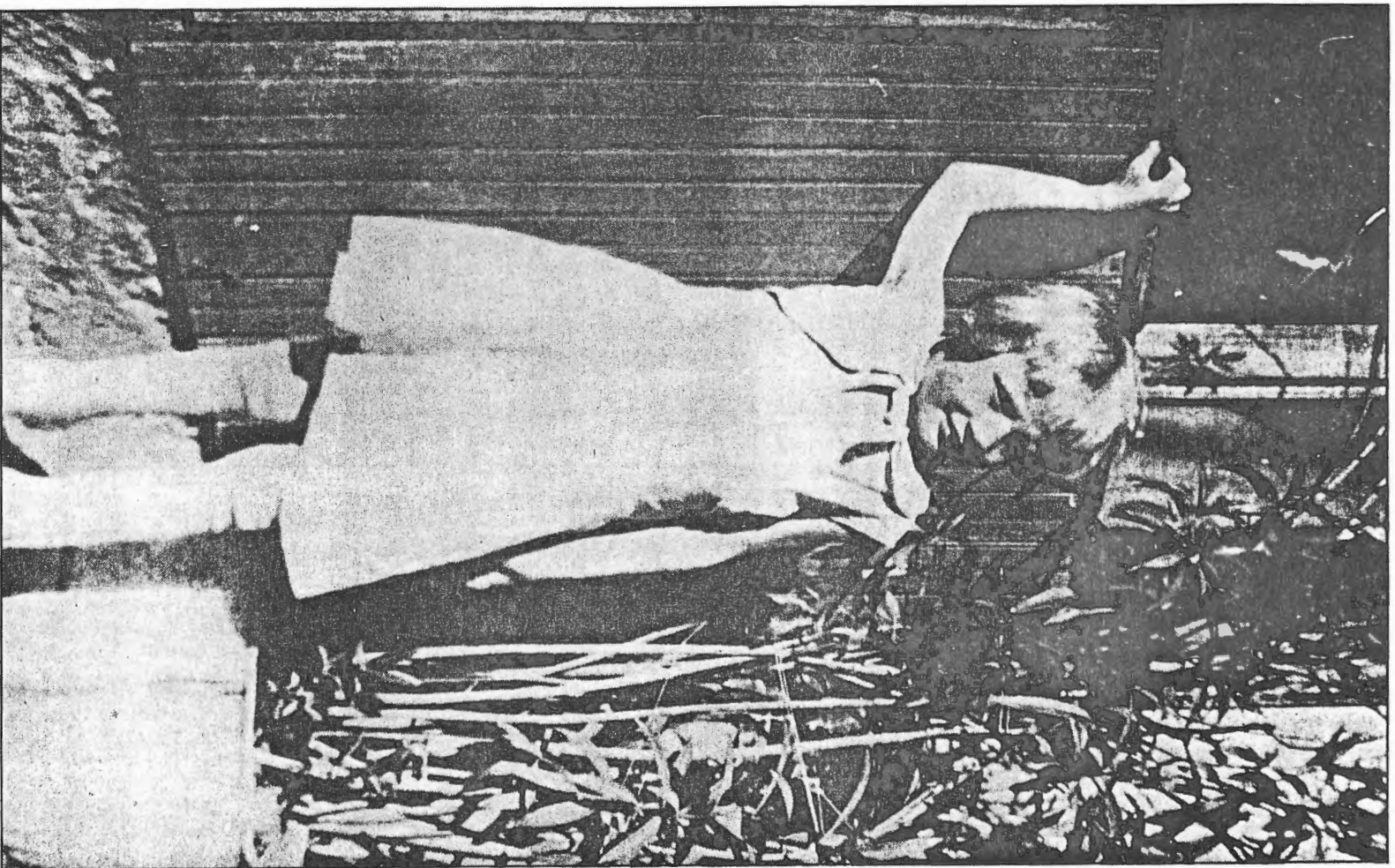
*In the province of Rizal, near Manila, after twelve years of enforced vaccination, the smallpox death rate was 67.24% in 1918, the highest ever reported in the history of smallpox. In Leicester, England, where vaccination had been abandoned for two generations, the death rate in 1904 among the unvaccinated was 1.56%.

Is Vaccination Worth Its Risk-H. B. Bradford

VACCINATION INEFFECTIVE

The late Dr. Walter R. Hadwen, M.D., M.R., C.S. (of Gloucester, England) said:

"During the fifteen years after anti-toxin was introduced, the death rate of fifteen years rose 25 percent above the death rate of fifteen years before, and bacteriologists can only attempt to show a reduction in fatality by a scandalous system of *statistical jugglery*, whereby large numbers of common sore throats are thrown into the count and called diphtheria on the basis of the fallacious germ theory of disease. Diphtheria serum has killed, without doubt, thousands of children directly, though it has never had the slightest effect in preventing or curing diphtheria itself, and I challenge anybody to prove that it has ever saved a single life. It is based upon superstition, it is built upon scientific theories, it is manufactured at the expense and the torture of animal life, and it is the greatest disgrace of the medical profession that the world has witnessed in the course of the centuries."



Sybil Knouf, age 5 years, crippled
through the use of Pneumonia
Serum.

REPRINT FROM LETTER IN NEW YORK MEDICAL WEEK

"It might be interesting to note that the majority of cases of diphtheria which I have seen during the past year have been in children who have received toxin-antitoxin at the hands of our public agencies. The publicity matter issued in the subject should in fairness, state that the protection offered is *not* 100 percent and that a definite ascertained proportion of the children 'immunized' against diphtheria *do* succumb to the disease."

The town of Chester, England is lauded as having the highest percentage of immunized children. This immunization was started in 1930. According to the official records, in 1930 the rate of cases of diphtheria per 1000 population in Chester was 2.61; in 1938 it was 3.11. In 1939 there were 135 reported cases of diphtheria in Chester, with 10 deaths.

INFLUENZA SERUM UNSUCCESSFUL

Morris Fishbein, M.D., in an editorial in "Hygeia" February, 1941:

"In the years that have passed we have learned much about influenza, but we do not yet have with certainty a specific method of treatment for the devastating influenza that prevailed in 1918. We have learned much about prevention, but again the methods now available are still in what is called scientifically an *early experimental stage*."

"What We Know About Influenza". A special article written for "Hygeia" by the United States Public Health Service:

"To date, there is no drug which can be used to prevent or cure infection with the influenza virus itself. Hundreds of compounds have been tested for such action but not one has been effective."

Col. Victor C. Vaughn, Washington, D. C., stated before the American Public Health Association, as reported in the Journal of the American Association, December 21, 1918:

"We have tried with the greatest thoroughness the vaccines for influenza. We have used influenza vaccine in great quantities, all they could make in the Army Laboratory, and have used all that Dr. McCoy could spare, and also have used that which Dr. Park has furnished us from the New York Laboratory and I do not hesitate to say that it has not done one bit of good . . . Any man, whether he be in private life, in the army or in Public Health Service, who vaccinates anybody for pneumonia or for influenza and tells him that it is going to prevent the disease is *not* telling the truth."

"This too must be admitted: Again and again, our hopes for prevention by vaccines or nose sprays, and for cure by serums, have been disappointed."



Our daughter Ivon, age 19 years, had always been one of the healthiest, happiest girls I have ever known. In her whole life she had never been sick, and she had what seemed to be a perfect body. People very often remarked about how well she looked, that she "just glowed with health". She simply abounded in energy and never seemed even to get tired. After working all day she would come home full of animation, ready for anything. She loved to dance and would turn on the radio and dance almost every evening.

The first of May this year, at the insistence of her employer, she was given diphtheria anti-toxin. A few hours after she took it she came home miserably ill, with a high fever, and delirious. She never saw another wall day. Almost immediately her arm became highly inflamed, red, and swollen, and a large red lump appeared where the anti-toxin was injected. It was six weeks before this lump disappeared. The first week after she was innoculated she lost five pounds, and while she insisted on trying to work it was all she could do to stay on her feet.

As soon as she began to recover from the most severe results of the anti-toxin, her employer had her vaccinated for small pox. After that her condition grew steadily worse.

The first of June we consulted another doctor. He was very much puzzled by her condition, admitted that he did not know what was wrong with her, and ordered her to bed for six weeks. We asked him whether he thought it was from the serums she had taken but he did not seem to want to discuss this. He admitted that it could be, but insisted that it probably was not.

By the middle of June she was bedfast and running a temperature of 104 to 105 for several hours every day. The doctors then pronounced her tubercular, and the middle of July, at their insistence, we took her to the Tubercular Sanitarium in Tahleah Oklahoma. We questioned the doctors in the sanitarium as to whether the serums she had been given could have caused her condition, but they said probably not and refused to discuss it further.

She grew steadily worse, losing weight constantly until she was a mere shadow. From her normal weight of 115 pounds she went to 80 pounds. However through all her illness she never coughed.

On September 3rd, just four months from the time that she was given the diphtheria anti-toxin, she died.

I make this statement of my own will and accord, with the hope that others may profit from our tragic experience, and that other mothers may be spared heart break such as mine.

Mrs. O. L. Coonrod

Subscribed and sworn to before me at Picher, Oklahoma

on this 2 day of November, 1940.

R. P. Brewer Notary Public
My commission expires June 21-1942

INFANTILE PARALYSIS SERUM

Paul deKruif in his article "Infantile Paralysis," in "Hygeia," February, 1941:

"The questions asked by parents about infantile paralysis are as simple as they are fundamental. In case my child is attacked, is there a drug that will save his life or prevent his permanent paralysis? To this, men of medical science and physicians *must still answer no*. In the event of an epidemic is there a way to prevent the general spread of infantile paralysis in a community? Public health officials, too, have only a negative answer. During an epidemic, is there a way in which we can guard our own children from infantile paralysis? Again, it is generally agreed by public health men and physicians that there is no reliable means of guarding children against this infection. This must be faced: After thirty years of research, in the laboratory and in the field, knowledge assuring the prevention, control, or cure of this mysterious disease is *not yet available*."

SERUM FOR POLIOMYELITIS (INFANTILE PARALYSIS)

To the Editor - What is the present status of convalescent serum in the treatment of anterior poliomyelitis?

J. G. Woodin, M.D., Grand Island, Neb.

Answer: - A simple and unchallenged answer cannot be given on the beneficial effect of convalescent serum in the treatment of acute anterior poliomyelitis. * * * Although the early workers in this field were unanimous in stating that convalescent serum tended to prevent the spread of paralysis and aided in the recovery of paralysis, present day workers view this early opinion with skepticism. At the present the matter is to be considered somewhat undecided but with the potential field of usefulness of serum markedly narrowed.

Reaction against the wholesale indiscriminate use of convalescent serum dates from the report of Park on the New York epidemic of 1931. This author reported on the serum treatment of half of the patients from a group of 927 in the pre-paralytic stage. The amount of paralysis judged by muscle examinations made shortly after the administration of serum and six months later showed no difference between the group that received serum and that which had received none. * * * Harmon also failed to find statistical evidence for the beneficial use of convalescent serum. * * *

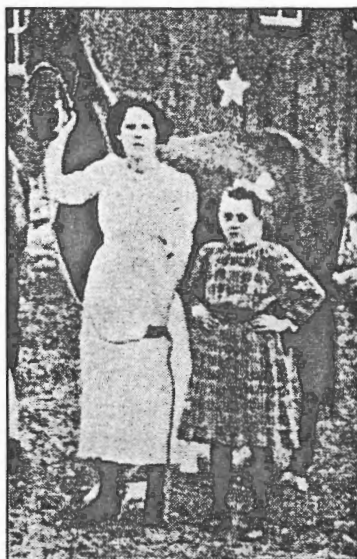
There are those who continue to use serum in early paralytic poliomyelitis, but no evidence can be said to favor such a procedure.

The Journal of the American Medical Ass., Dec. 21, 1940

For example: Dr. Leake, U.S. Medical Director, warned American doctors in the Journal of the American Medical Association (December 28, 1935, pages 2152-3) that vaccines for prevention and treatment were useless, and that these vaccines caused many cases of paralysis with a high death rate.

PETITION TO THE PRESIDENT

CASE No. 27



RUTH A. MINNICK

RUTH A. MINNICK, daughter of S. V. Minnick, R. D. No. 2,
Carthage, N. Y.

Age 10½.

Vaccinated Sept. 22.

Commenced to complain Oct. 2,—10 days from vaccination.

Died Oct. 10.

Diagnosis, "Infantile Paralysis."

This little girl's health was perfect. She and her older brother, age 13, were vaccinated on the same day. Both became ill, the little girl critically so. She had no convulsions; was unconscious four days; her throat was paralyzed. Death occurred as stated. The boy was "very sick" with symptoms "much like the girl," but recovered.

DECLINE OF TYPHOID IN THE ARMY

According to Sir William Osler (and these figures have never been disputed) the attack rate per 1,000 men in 1898, was 88.56 and the death rate 9.74. In 1899 the attack rate was 22.98 and the death rate 2.78. The decline continued until 1908 when the attack rate was 3.2 and the death rate .32. There was no typhoid inoculation in the army previous to March, 1909. It will, therefore, be seen that the *disease had almost disappeared before inoculation was begun.*

This is from U. S. Health Report:

"During the Chateau-Thierry offensive, diarrheal diseases were prevalent in the troops, approximately 75 percent. The high incidence of intestinal diseases in this sector was due to the entire disregard of the rules of sanitation.

"Following the offensive in the Argonne sector, typhoid and paratyphoid began to be reported from practically all divisions engaged in that offensive - 874 typhoids and paratyphoids have been reported in the A.E.F. since October 1, 1918.

"In July, 1918, a unit of 248 men from Camp Cody reached England with typhoid prevailing extensively; 98 men or 39.5 per cent were ill with the disease and the case death rate was 8.41 percent. It was evident that the men were exposed to infection through contaminated drinking water while traveling in the United States. The unit *had been vaccinated* a few months prior to the occurrence of the epidemic."

Protection against typhoid by inoculation seems to be effective only when the men are not exposed to any infection! The statistics of the Registrar General of England say that the typhoid death rate in Great Britain fifty years ago was 390 per million. In 1917 it was only 28 per million. As the reduction at home was not due to inoculation, why ascribe the reduction in the army to that cause? It should be noted that intestinal diseases, which might ordinarily be classed as typhoid, were listed as paratyphoid dysentery, diarrhea, enteritis, and pyrexia, thus putting typhoid inoculation in less bad repute than is shown by typhoid statistics. A soldier is as a rule quite ill before being admitted to hospital; yet the U. S. Army Report of the Surgeon General, for 1917, shows up to that date, the admissions to hospital from typhoid vaccination and vaccinia reached the great number of 19,608.

"Beware! The Dangers of Vaccination"
Oregon Anti-Vivisection Association

TYPHOID FEVER TREATMENT

Improved knowledge of the nature and causation of Typhoid Fever has not led to a specific treatment, nor have means been found to cut short the illness, though its fatality has been reduced. Since the development of serum therapy, various anti-typhoid sera have been tried in the treatment of the disease, but on the whole with indifferent success.

INFORMATION FOR DOCTORS ONLY:

The following are excerpts from The Journal of the American Medical Association, a periodical presumably read only by the profession:

"Toxin-antitoxin is *not* a 'harmless preparation', and should not be given to school children in a haphazard way". - March 9th, 1929, page 841.

"The injection of horse serum in a sensitized person always involves a menace of some moment." November 23, 1929 - page 1652.

"Everyone who deals extensively with immune serums realizes that their practical use is attended with certain menaces--*anaphylactic shock occasionally occurs*. The most common symptom is a skin eruption, which is usually urticarial but may vary considerably in type. Edema may appear in various parts of the body, notably the face. Multiple joint pains, albuminuria, leukocytosis and general malaise are sometimes encountered.

"The possibility of these occurrences may indicate why the use of therapeutic serums awakens hesitancy in a physician faced with the possibility of discomfort, harm and even death in a patient, despite all care to avert any untoward effects." -- June 6, 1931, Editorial.

"Excluding hearsay reports, we obtained records in 140 instances of harmful results, including a number of cases in which *death was considered to have been caused by the use of vaccines subcutaneously injected*. Seventeen cases of asthma were reported to have followed courses of bacterial vaccines administered to patients who previously were not known to have suffered from asthma." --April 18, 1931

* * *

E. J. Colling, M.D., Public Vaccinator of London, gave up his position and declared:

"Vaccination transmits filthy and dangerous diseases, without offering any protection whatever."

John Harly, M.D., F.R.C.P., late consulting physician London Fever Hospital and St. Thomas Hospital:

"It is easy to confuse inoculation and the effect of strict sanitation as a preventive factor, but neglect of the latter would very soon prove the inutility of the former."

Dr. J. F. Baldwin, president of the Ohio State Medical Ass'n. in 1920, said in his address to that body:

"The treatment of diseases, or their prevention, by anti-toxins, vaccines and serums, is still largely in the experimental stage, with grave doubts as to their value. Unfortunately, *much of our literature on the subject --including statistics -- is furnished by the manufacturers of them* who are interested above all things in the financial aspects of it". - And then what happened to Dr. Baldwin? HE WAS DEPOSED FROM HIS POSITION AT THE NEXT ELECTION.

Dr. J. C. Ward of London:

"I believed that vaccination prevented small pox. I believed that vaccination, if it did not prevent small pox, modified it; I believed that re-vaccination, if only frequent enough, gave immunity. *Experience* has driven all that out of my head. I have seen that people who have been vaccinated get smallpox, and people who have had small pox get it a second time and die."

Dr. E. M. Ripley, M.D., of Connecticut:

"I have been in practice fifty-six years, the first five I, too, vaccinated. Then I found out what a miserable sham vaccination was and is. There is more danger to health and lives of humanity *in compulsory vaccination than in any other department of medicine.*"

George Bernard Shaw (in response to a request from Dr. Pabst, a Brooklyn physician, for his opinion on vaccination: London, July 19, 1931:

"I was vaccinated in infancy and had good marks of it. In the great epidemic of 1881 (I was born in 1856), I caught smallpox.

"During the last considerable epidemic at the turn of the century I was a member of the health committee of London Borough Council, and I learned how the credit of vaccination is *kept up statistically* by diagnosing all the re-vaccinated cases as pustular eczema, varioloids, or whatnot except smallpox.

"I discovered a *suppressed report* of the Metropolitan Asylums Board on a set of revaccinations which had produced extraordinarily disastrous results. Meanwhile, I had studied the literature and statistics of the subject.

"I even induced a celebrated bacteriologist to read Jenner (Edward Jenner, the English doctor who first employed vaccination as a preventative of smallpox). I have no doubt whatever that general infantile vaccination is *unscientific an abomination* and should be made a criminal practice."

--G. Bernard Shaw

UNRELIABILITY

OF

PUBLISHED

VACCINATION

STATISTICS

MEDICAL STATISTICS ON VACCINATION UNRELIABLE

Dr. J. F. Baldwin of Columbus, Ohio, in his presidential address before the Ohio Medical Association, June 1-3, 1920, called attention to the *suppression of unfavorable statistics by manufacturers* of vaccines and serums and stated that statistics can be of no possible value when the unfavorable ones are suppressed and only the favorable ones published. He said:

"The treatment of diseases, or their prevention, by anti-toxins, serums and vaccines is still very largely in the experimental stage, with grave doubts as to the value of the vast majority. Unfortunately, much of our literature on these subjects, including statistics, is furnished by the manufacturers who are interested above all things, in the financial aspects of their product. One of the most prominent general practitioners in Ohio called my attention some months ago to the fact that even diphtheria anti-toxin acquired its reputation when the doses used were so small as would now be regarded as entirely inadequate, and those doses given at a stage of the disease in which their administration is now looked upon as practically useless."

* * * * *

"Statistics can be of no possible value when the unfavorable ones are suppressed and only the favorable ones published. It is an old legal aphorism: 'Falsus in uno, falsus in omnibus' - false in one thing, false in all, and that maxim should be rigidly applied to all such reports, statistical and otherwise."

Commercialism behind compulsory vaccination--
H. B. Anderson of The Citizens'
Medical Reference Bureau, N.Y.C

Dr. Bridges, formerly an Inspector under the Government Board says:

"A doctor vaccinating a child will obviously be unwilling to say that vaccination did harm, unless he is a man above the ordinary standard of courage and conscientiousness."

Dr. Killick Millard, the Medical Officer of Health for Leicester (who professes a belief in vaccination), after referring to these cases says:

"Undoubtedly the record of the injuries which have been caused by vaccination constitutes painful reading, and the recollection of the past should make medical men more Tolerant of the opposition to vaccination than is sometimes the case."

The Vagaries of Vaccination & Propaganda
National Anti-Vaccination League, London

FACTS OMITTED FROM STATISTICS

Says H. B. Bradford, author of "Is Vaccination Worth the Risk?"

"The health officer of a Maryland town told me he had never seen any evil effects from vaccination, so I thought I would start out to find him a few.

"A boy he vaccinated had a great abscess break out on his neck, which kept him from bending his head. It ran green and yellow matter for several days, and had to be lanced and drained. The boy was sick a long time afterwards. Another boy had a sore break out on his chin, which ran up the side of his ear. His mother told me she thought he would lose his ear from it. He was vaccinated so that he could attend school.

"A member of the Maryland legislature (Mr. Duvall) told me that of thirty pupils vaccinated in a school where his brother taught, seventeen of the thirty got diphtheria soon afterwards.

"I found two men in the town who had smallpox after their vaccinations. A mother told me she could see the cords working in her little girl's leg after this tissue-rotting poison had eaten away the flesh nearly to the bone! - *Vaccinal syphilis!*

"I continued my investigation in the city of Washington, D. C. An editor of a leading newspaper nearly lost his son from vaccination. Four doctors managed to save his life. He told me he would never send another child to the public schools if that was the price to be paid. A reporter on another paper told me he contracted smallpox so soon after vaccination that he had cowpox and smallpox growing together on his arm! One of the commissioners told me he would never have allowed vaccination of his little girl had he known what a terrible sore it would make on her leg.

"At Fanny Hurst's Home for the Blind I talked with a young man, *blinded for life* from vaccination.

"I called to see a pretty little blue-eyed girl -- one eye blue, the other glass! An abscess came in her eye after vaccination and it had to be cut out.

"Two children across the street from my home in Washington were vaccinated in order to attend school. Both developed diphtheria, both were promptly given antitoxin, and both died suddenly after the antitoxin.

"One mother told me that her little girl was *buried* with fresh vaccine scab on her arm!

"Doctors who vaccinate and don't know of these disasters are *criminally ignorant*; if they do know and still vaccinate they are '*vicious grafters*' as Dr. C. E. Page of Boston said.

"A Mrs. Burley told me her son had never been sick a day until vaccinated, after which he got diphtheria and has never been well since. I asked 'Who vaccinated him?' She replied: 'The health officer!' (a former one).

"A young man I know (Robinson) was forced to be vaccinated. Smallpox followed in two weeks after a "taking vaccination." Tuberculosis of the sternum developed later and he underwent two operations. The surgeon told him his tuberculosis came from his vaccination. While at the smallpox hospital he found out that everybody there had been vaccinated before they contracted smallpox.

"A postal official and his daughter were vaccinated during the 1924 smallpox scare. Disease of the glands followed in both cases. He developed a cancer which completely filled the stomach. His daughter dropped unconscious on the street with sleeping sickness. She was in the hospital for a long time, with what ending I do not know."

Dr. Carr, former editor of Columbus Medical Journal:

"We had in this city, (Columbus, Ohio) an alleged epidemic of smallpox. A great many people were quarantined, and a great many were vaccinated.

"I took the pains to obtain this list of people, who were put down as never vaccinated. I obtained the list from the books at the Board of Health, and started out to visit the list. I visited the first thirty, and without exception they had been vaccinated, some of them three or four times.

"I went back to the office, demanding an explanation of their false statistics, and the reply I got was as follows: 'It doesn't make any difference how many vaccination scars a man may be carrying, he has not been properly vaccinated if he gets smallpox. The only proof we need that he had not been properly vaccinated is the fact that he catches smallpox. And if he has not been properly vaccinated it is equivalent to never vaccinated.' Therefore, they simply find out who has smallpox, and then put them down as never vaccinated."

Another method of reducing smallpox statistics is to list smallpox cases in previously vaccinated children as chicken-pox.

It is noteworthy that the report of the New York State Department of Health for 1914, made no admission or record of any one of at least 30 deaths revealed in Mr. Loyster's report (which included his own son, see page 70) as being from vaccination. Rather they are concealed under other heads such as "Tetanus", "Purulent Infection", and "Septicemia", "Infantile Paralysis", "Meningitis", etc.

FALSE CLAIMS

Methods of statistical manipulation employed by serum interests are explained by Dr. Walter R. Hadwen, M.D., M.R.C.S., L.R.C.P., L.S.A.:

"The death rate from diphtheria to the living population is today higher than it was before antitoxin was introduced. The Registrar General's statistics of my country show that antitoxin instead of decreasing has increased the death rate, and the only way by which the statistics can be made to appear lower is by juggling with case mortality figures, calling common sore throats 'diphtheria,' and so 'curing' harmless cases by antitoxin, cases that would have got well without any treatment at all. If, for instance, you have a death rate of 24 per cent from genuine diphtheria, and you add two harmless sore throats to every one of diphtheria you reduce the death rate to 8 percent. That is how the trick has been done and the public deceived. The cases have been trebled and the death rate fictitiously brought down. They cry, 'Look what antitoxin has done!' I reply: 'Look what your statistical Juggery has accomplished.'"

J. H. Tilden, M. D., says:

"Antitoxin cures diphtheria. When it does not, it was not used in time, the dose was not large enough, it was not administered often enough, or the remedy was not up to standard."

"When the patient dies in convulsions, he was overwhelmed by the toxins of diphtheria. When the antitoxin is administered to a grown person for its prophylactic effect, and the person dies in a few minutes, it proves that he has lost his toxophylaxin or toxosozin (normal protection) power. A wonderful science--the home of alibis galore."

"The Hell of Vivisection" -- Oregon
Anti-Vivisection Association

Frank R. Marquette, M. D., in an address before the Pennsylvania legislature, reports:

"Only 88 children under the age of 5 in England and Wales died of smallpox in the 24 years ending December, 1928, but 232 died of vaccination."

Thus smallpox is only one-third as deadly as the remedy supposed to prevent it.

Herbert Spencer said:

"Demonstration fails to change established belief."

Dr. Crookshank writes:

"It is an extraordinary fact that in the text books of medicine, no reference is made to the influence of all the Sanitary Acts upon the existence of smallpox and its prevention. The student is taught that smallpox has declined since the introduction of vaccination, and there the matter is left!"

Dr. W. Hutchman, M.R.C.S., former Public Vaccinator of Liverpool:

"I affirm that now, as for thirty years past, within my own personal experience and observation, vaccination has proved itself a curse rather than a blessing, causing primarily or secondarily more deaths than any other disease of childhood."

The most amazing thing about the whole subject of vaccination is how such a mass of medical men and others can do so little investigating about it. Dr. Mason Padelford makes the statement that:

"Only 920,000 persons out of four million (in Massachusetts) are 'protected', and yet smallpox is so rare that the majority of physicians in the state probably have never seen a case of the disease."

-o-

Bulletin 8512 issued by the Surgeon General of the United States, states that one soldier out of each 5,000 contracted smallpox in the World War. They were supposed to be protected. While during the same period our civil war population had one case of smallpox to 40,000. Would you call that immunity?

Despite rigid vaccination laws, in the epidemic in Germany, in 1817, there were four thousand cases of smallpox, all vaccinated that year.

THE
COMMERCIAL FORCES
BEHIND
VACCINATION

Dr. John P. Koehler, Commissioner of Health of Milwaukee, Wisconsin, in an article in The Wisconsin Medical Journal, November, 1925:

"Since people cannot be vaccinated against their will, the biggest job of a health department has always been, and always will be, to persuade the unprotected people to get vaccinated. This we attempted to do in three ways: first, by education; second, by *fright*; and third, by *pressure*.

"We dislike very much to mention fright and pressure, yet *they accomplish more than education*, because they work faster than education, which is normally a slow process. * * *

"During the months of March and April we tried education, and vaccinated only 62,000. During May we made use of fright and pressure, and vaccinated 223,000 people.

"Our educational program consisted of warnings in the daily papers, smallpox posters on the streets, in stores and factories, special smallpox bulletins for all large places of employment, and special letters to all large employers from the health department and the association of commerce, calling their attention to a threatening smallpox epidemic. The radio was also made use of in this work.

"As the conditions grew worse, we felt justified in using stronger measures. We had some good pictures taken of patients suffering from the confluent type of smallpox, and had posters, showing these pictures, distributed all over the city. The moving picture theaters cooperated at this time by issuing warnings on the screen.

"The newspapers published daily the names and addresses of people dying from smallpox. A second letter was sent to all factories, stores, and other places of business, informing them of a rapidly approaching smallpox epidemic, and advising them to have their employees vaccinated immediately, and thereby prevent a serious financial loss to the city which might occur if a real epidemic developed.

"At this time the department was vaccinating thousands of people daily, but there were still *too many who could neither be educated nor frightened into vaccination*. Cases and deaths each amounted to a considerable number, and we now felt justified in using all of the power a health officer has, and if that was not enough, to get more.

"We sent out a third letter to all employers requesting them to have all of their employees vaccinated and at the same time informing them that if a smallpox case developed in their place of employment in the future we would consider their place of business a menace to the health of the community and very likely place the entire establishment under quarantine until it could be cleaned up and made safe for the public. *Putting this responsibility on the employer* drove in thousands of anti-vaccinationists who could better afford to get vaccinated than lose their jobs. All employers cooperated very bravely with this last request, al-

though in a few instances it was necessary to lay off old, reliable and valuable employees"

From "The Facts Against Compulsory Vaccination",
by H.B. Anderson of Citizens' Med. Ref. Bureau, N.Y.C.

COMMERCIALISM BEHIND VACCINATION

Dr. Mather Pfeifferberger of Alton, Illinois, formerly President of the Illinois State Medical Society, in an address before the Second Annual Health Officers Conference, December 3, 1926:

"I am informed that epidemic and endemic infections cause only 12% of all deaths and that this percentage is declining very rapidly. *Less than 15% of all children would ever get diphtheria even under epidemic conditions, while 100% are prospects for toxin-antitoxin.* The percentage who would ever get smallpox, under present time conditions, is even less; but 100% are prospects for vaccination. Scarlet fever will soon come in for its 100% also, as it may for measles, judging from the reports on that disease.

Dr. Guy L. Keifer, Commissioner of Health in Michigan, in "Journal of the Michigan State Medical Society", August, 1926:

"With 100,000 babies born every year, *the increase in physicians' income from diphtheria would be from one-quarter to three-quarters of a million dollars if we would immunize all children against this disease soon after they are six months old.* And, he adds that "\$200,000 for vaccination against smallpox, and more for other diseases, *will increase the earnings of the physician who actively sponsors this modern type of practice.*"

"Your Life is in Their Hands" - Cash Asher

Dr. W. S. Rankin, while Secretary of the North Carolina State Board of Health, in the Journal of the American Medical Association, November 4, 1922:

"Last year we inoculated 70,000 persons against typhoid fever and 1000 children between six and twelve years of age against diphtheria. The county commissioner paid the local practitioners 25 cents for each complete inoculation and that was \$20,000 which went to the profession last year which otherwise would not have been received.

"The work of the medical profession with the state board of health *does not stop when that \$20,000 is paid. It goes on.* In the dispensaries which were conducted in Union County, N. C., with 35,000 people, the physicians vaccinated 10,000 people in a campaign of five weeks. That was \$2,500 paid to twenty physicians—only \$125 each, *but think of the effect on the business of the profession in keeping up that work. It goes on.*"

C. S. Nelson, M. D., in an article "Proper Relationship Between the State Department of Health, and the Medical Profession", published in the Illinois Medical Journal, March, 1928:

"Stop and consider what it would mean to you, if the present health propaganda and the prevention of preventable diseases should be universally adopted--annual physical examinations, vaccinations against smallpox, diphtheria and I think in the near future, scarlet fever and measles. *Would it not appear to you that the revenue from this source would far exceed the remuneration received from the comparatively few diseases treated that would naturally occur in the families of your clientele?* And besides ~~it~~ it would be much more satisfactory."

Andrew S. Draper, former Commissioner of Education, in his fifth annual report of the New York State Education Department, for the year ending July 31, 1908:

"In many cases physicians become interested in the strict enforcement of the law because of the fees resulting therefrom. In some school districts a physician is appointed by the trustees and the entire expense of vaccinating the children is borne by the district. In many others, parents are requested to have their children vaccinated, and a physician is appointed who vaccinates only those children whose parents do not provide for their vaccination. In any event all the children are vaccinated and provision is made for prompt payment for such service. In the more populous districts the medical fees resulting from vaccination are an important item. It is not claimed that physicians as a rule are governed in this matter by a mercenary motive. On the contrary, in the great majority of cases, their action in urging vaccination emanates from their professional knowledge of the subject and their desire to render a distinct service to the people of the community in which they live. However, this mercenary motive has been the controlling factor in a sufficient number of cases which have come to the attention of this Department to justify the above assertion."

Editorial in Boston Medical and Surgical Journal, September 17, 1925:

"The young physician who believes that his life work will consist in a daily round of house to house visits, watching the course of typhoid fever, of pneumonia and of inoperable cancer, is making a grave mistake. If he is to keep abreast of the times and *enjoy a practice that will be considered successful* his duties will consist of *vaccinations and inoculations, periodic health examination and advice as to hygiene, diet and the maintenance of health.*"

From H. B. Anderson, "The Facts Against Compulsory Vaccination"

PUBLIC ORGANIZATIONS MEDIUMS OF PROMOTION

Extract from editorial in New York State Journal of Medicine, June, 1928:

"The task of educating the people along medical lines would be hopeless if it had been done entirely by physicians; but fortunately the medical profession has the aid of the departments of health, the public school, and lay organizations to such an extent that health education is invoked as justifying organized sports and the promotion of artificial beauty and comeliness."

Extract from an editorial in the Journal of the American Medical Association, May 5, 1928:

"The Bureau of Health and Public Instruction is reaching a tremendous public through radio lectures, health talks and direct correspondence. Much of its effort during the past year has been devoted to the promotion of periodic physical examination. Of special significance is its cooperation with the National Education Association in bringing health education directly to children in the schools. The great philosopher Leibnitz said that *he could change the nature of the world if permitted to educate the children for two years.*"

MEDICAL CONTROL OF HEALTH PROGRAMS

Dr. W. A. Evans, formerly Commissioner of Health of Chicago, from address published in the Journal of the American Medical Association, September 16, 1911:

"As I see it, the wise thing for the medical profession to do is to get right into and man every great health movement; man health departments, tuberculosis societies, child and infant welfare societies, housing societies, etc. The future of the profession depends on keeping matters so that *when the public mind thinks of these things, it automatically thinks of physicians, and not of sociologists or sanitary engineers. The profession cannot afford to have these places occupied by others than medical men.*"

Resolution adopted by the staff of the North Carolina State Board of Health, and published in The Survey, New York, September 15, 1922:

"It is a fundamental purpose of this staff to seek to enlarge and deepen the interest of the medical profession in public health work to the end that the profession in all public matters may assume the initiative and have the chief credit for whatever there is of achievement in disease prevention and health promotion."

From "The Facts Against Compulsory Vaccination" - H. B. Anderson

Bruce Calvert in "The Open Road":

"Many millions of dollars are invested in drug factories, turning out vaccines, serums, and toxin-~~antitoxins~~ antitoxins. None of these vast medical factories will suspend business until forced to do so by the advancing intelligence of the people. * * * The vast army of lazy-minded doctors is glad to pick up an easy and rich revenue out of the vaccinating business. NO EVILS ARE EVER RIGHTED BY THOSE WHO PROFIT BY THEM."

SERUM MANUFACTURERS' PROFITS

Report of McKesson and Robbins, Inc., and subsidiaries for six months ended June 30, 1936, shows consolidated new profit of \$1,250,703 after depreciation, interest, federal income taxes and preferred dividends of subsidiaries, equivalent after semi-annual dividend requirements on \$3 preferred stock, to 35 cents a share on 1,282,983 shares (par \$5) of common stock. No provision was made for federal surtax on undistributed profits.

This compares with \$789,826 equal after dividends on old 7 percent preferred stock to four cents a share on 1,069,783 common shares in first half of 1935.

Net sales for six months ended June 30, 1936, totaled \$71,448,627 compared with \$63,296,723 for six months ended June 30, 1935, an increase of \$8,151,904 or 12.9 percent.

Parke Davis and Co. and subsidiaries report for three months ended June 30, 1936, net profits of \$1,747,071 after depreciation, amortization of patents and federal income taxes, equal to 36 cents a share on 4,891,169 shares of no-par capital stock. No provision was made for surtax on undivided profits inasmuch as it is the intention of the company to pay out all its earnings in dividends.

For six months ended June 30, last, net profit was \$4,059,765 after charges and taxes, equal to 83 cents a share.

For twelve months ended June 30, 1936, net profit was \$8,608,489 after charges and taxes equal to \$1.76 a share, compared with \$8,733,757 or \$1.78 a share for 12 months ended June 30, 1935.

The above two concerns are big manufacturers of pus products. So you see, dear readers, why such "care" is being taken of the "dear little children" by the serum-selling doctors.

Of course, all the stockholders of the two above mentioned companies are interested in, is the protection of the little children and the elimination of disease.

The above financial statements are taken from the August issue of Standard Remedies.

To a man up a tree it looks as if there was something besides "humanitarianism" in this fight to "prevent disease".

DOCTORS IN THE PAY OF SERUM MANUFACTURERS

"One Company making vaccines, for instance, has on its staff a number of drug doctors who are also high in the councils of the American Medical Association. These medicine men write pamphlets giving glowing accounts of the benefits of inoculation against everything from smallpox to the pip. When the board of health and school authorities in your town get on your trail to vaccinate your child, the long, long strings are being pulled from way back behind the horizon, by this enormous, sinister and invisible power. The 'health' officials and the little doctors with whom you deal are merely *puppets* that dance to that piping and pulling. The local doctor, if he is one of the common garden variety of M. D. knows nothing about vaccination, though he talks of it in a way to split the ears of the groundlings. He is concerned largely with being in good and regular standing with the American Medical Association, and he imitates without question, the blah-blahing of the bellwethers of the flock. He is far less capable of judging sanely in a matter like vaccination than is an intelligent layman; and the only thing that enables him to earn a living is the stupid credulity of a community trained from babyhood to a superstitious overestimation of what doctors know. There are exceptions of course; I am talking of the mass. It is that mass, led by its Shamana, that wants to put compulsory vaccination over on the American people. It is the same crowd that has persecuted Dr. E. Duncan Bulkley for advocating the treatment of cancer by natural methods, instead of the profitable knife."

--John Hayden-Physical Culture Magazine.

HEALTH DEPARTMENT NETS THOUSANDS FROM SERUM SALES

Extract from "Public Health Reports," May 29, 1925, giving a list of the products which the Bureau of Laboratories of the New York City Department of Health in 1925 was licensed to sell.

"Diphtheria antitoxin; tetanus antitoxin; antimeningococcic serum; antipneumococcic serum; normal horse serum; vaccine virus; rabies vaccine (Pasteur); tuberculin old; and bacterial vaccines made from gonococcus, paratyphoid bacillus A, paratyphoid bacillus B, pertussis bacillus, pneumococcus, staphylococcus albus, staphylococcus aureus, streptococcus, and typhoid bacillus; diphtheria toxin-antitoxin mixture; diphtheria toxin for Schick test."

(Note:--The cash receipts of the New York City Department of Health from "Sales of Virus" in 1924 amounted to \$16,051.98 and its receipts from the "Sales of Antitoxin" amounted to \$53,277.41, making a total of \$69,329.39, as brought out in the Annual Report of the New York City Department of Health for the year 1924.) --H. B. Anderson--Citizens' Medical References Bureau, New York City.

Extract from article in "Public Health Reports," May 29, 1925, giving a list of the products which the Massachusetts Department of Health in 1925 was licensed to sell.

"Diphtheria antitoxin; antimeningococcus serum; anti-pneumococcus serum; vaccine virus; bacterial vaccines made from paratyphoid bacillus A, paratyphoid bacillus B, and typhoid bacillus; diphtheria toxin-antitoxin mixture; diphtheria toxin for Schick test."

SMALLPOX EPIDEMICS

From "The Facts Against Compulsory Vaccination" by H. B. Anderson.

"All that happens is that *WHEN AN EPIDEMIC OF SMALLPOX BREAKS OUT THE MEDICAL OFFICER OF HEALTH DOES HIS BEST TO FRIGHTEN THE PUBLIC INTO WHOLESAL VACCINATION*, his success depending partly on his personality and partly on whether the disease itself seems dangerous to the people of the district. This is an unsatisfactory way of meeting smallpox in a civilized community and it is time that the alternatives were fully discussed."

--London Lancet, January 29, 1927,
Leading British Medical Journal

FAKE EPIDEMICS

In July, 1924 when the number of smallpox cases throughout the country was *at its minimum*, an alarming story was carried by the Associated Press based upon a statement issued by Surgeon General Cumming of the United States Public Health Service. The Surgeon General expressed himself as "apprehensive over the growing number of smallpox cases in the country."

The great Nome "*epidemic*" of a few years ago consisted of *twenty-two* alleged cases of diphtheria and *five* fatalities - *and the immense profit in serums and serum propaganda*. The New York Graphic exposed this gigantic stunt. Airplane assistance to carry the anti-toxin to Nome was declined in favor of a long, hazardous run by dogsled, taking motion picture apparatus, that the event might be chronicled on the motion picture screens of the land, with consequent valuable publicity.

THE RABIES RACKET

Harry Schoening, Chief, Pathological Division, U. S. Dept. of Agriculture:

"Annually the legitimate grafters in the health departments stage a mad dog scare, or, as they explain it, 'dramatize' the superstition of ignorant folk for the purpose of getting appropriations to run the health department in the manner they think it should be run."

"The indignation and annoyance of health department dognapers caused a few citizens of no importance or influence are, in the opinion of the shrewd politician in charge of the health department, insignificant as compared with the publicity and prestige the department derives from the yarns in the papers and the letters to the editor -- many of which are composed by health department employees".

MAD DOG SCARES

(Excerpts from "The Herald Statesman," Yonkers, N. Y., March 23, 1928)

The reports of mad dogs at large, in various sections of the country are singularly alike. *Their appearance in press reports as usual is coincident with the literature of serum manufacturers announcing vaccines for the prevention of rabies.* In many sections of the country it also ushers in campaigns for vaccination of dogs in the interest of the public's health.

These so-called rabies vaccines have been tested by health officers and bacteriologists, both here and abroad, and declared useless. The veterinary department of the University of Pennsylvania, the alma mater of the profession in this country, after ten years of careful investigation, have declared them useless. The American Veterinary Medical Association has repeatedly refused to endorse them.

There are many veterinarians and health officers who believe that the increase in rabies can be attributed directly to the distribution of rabies vaccines, and that they have carried the disease into sections where it had not been known before.

In support of this opinion, there are two facts that cannot be denied. The first is that *the increase in rabies in this country has been coincident with the use of rabies vaccines.* The second is that the two countries in which rabies is now most prevalent are the two countries in which rabies vaccines have been most widely used -- the United States and Japan . . .

There are many well-informed men who have grave doubts as to the existence of hydrophobia outside of the human mind.

It is the opinion of the writer that too much virus has already been distributed.

Mm. A. Bruette, M. D. C., Former Assistant to
Dr. A. D. Melvin, Chief of Bureau of Animal Industry

PROFITS FROM RABIES VACCINATIONS

According to Dr. Irving S. Cutter, dean of the medical school of Northwestern University, 100,000 people a year take the Pasteur treatment. At a price of from \$15.00 up for the treatment, the enormous profit to manufacturers of Pasteurian nostrums can be estimated. From

January, 1923, to January, 1934, approximately 3,700,000 doses of anti-rabies vaccine were prepared by commercial houses (from the records of the Division of Virus-Serum Control, U. S. Bureau of Animal Industry). This serum, which can be bought for 12¢ a shot by veterinarians, is then sold to the public for prices ranging up to \$2.00 or more for three shots. Is it any wonder veterinarians are loudly backing rabies scares, and agitating for compulsory vaccination of dogs?

CONTROL OF HEALTH

"The Facts Against Compulsory Vaccination" by H. B. Anderson, of the Citizens' Medical Reference Bureau, New York City:

Samuel B. Woodward in a Paper published in the Boston Medical and Surgical Journal, September 15, 1921, says:

"The so-called vaccination bills are, in common with most health bills, referred to the Committee on Public Health, and the composition of this committee is of the utmost importance, for the legislature is naturally prone to follow its recommendations. It is, therefore, important to get in touch with the President of the Senate and the Speaker of the House, in whose hands the appointments to this, as to every committee lie, and this, during my three years as your President, I always did, finding understanding and cooperation in my endeavor to have men with medically sane minds, the majority appointees. The reason for this cooperation was not, however, always a desire for the improvement of health conditions in the Commonwealth.

"In 1919, a gentleman who afterwards became rather conspicuous as a candidate for State Treasurer, on account of the similarity of his name with that of the present occupant of the office, was the ranking Senator on the Committee of Public Health. Unsuccessful efforts had been made by your legislative committee to prevent his reelection. He was a pronounced anti-vaccinationist and anti all good health measures, yet courtesy would have made him chairman of his committee. The President of the Senate, however, told me that he would appoint as chairman any senator endorsed by the physicians of the state, and he kept his word.

"My successor in office, Dr. Worcester, was much chagrined a year later when he failed to obtain what he desired from the same gentleman, and may be interested to know why I may have succeeded while he failed. The Senator in question was connected with a Boston bank. I am connected with a bank in Worcester and went to him provided with a letter of introduction from the President of one of the largest banks in Boston.

"Country banks maintain deposits in city banks, and some two months after our interview, the President of the Massachusetts Senate appeared in Worcester and suggested that I should use his bank as my bank of deposit".

Dr. Moore of Cadillac, Michigan, in a discussion of Medical Legislation, published in the Journal of the Michigan State Medical Society, June, 1928, p. 428:

"I think it is within the power of every physician to make a friend of his Senator and Representative. It is done in business, and it is done socially. Get him out and take him on a fishing trip or a hunting trip, or get him into a poker game. Get under his skin. Don't let him know what you are doing when you are talking to him, but get him so full of it that he is just all for you."

Three times during the term of office of an ex-governor of Pennsylvania, the legislature voted by a large majority to curb compulsory vaccination, and three times he vetoed the bill directly or by pocket veto. Thereafter, whenever a child died or suffered from vaccination the governor received notice of the child's death and funeral until he finally said, "For God's sake stop sending me those notices," and expressed his regret that he had vetoed the bills.

WHAT WOULD HAPPEN IF HEALTH BOARDS GAVE PEOPLE THE FACTS

Suppose health boards were frank enough to tell the people that there are those who believe that the Schick test is a *useless* procedure both in private and public health practice, as stated in an editorial in the Medical Journal and Record, March 3, 1926.

Suppose they were to tell the people that there is *no uniformity of opinions* as to what mixture should be used for the alleged prevention of diphtheria; that fourteen different mixtures were tried out in the New York City public schools, one mixture being tried out on one group and other mixtures on other groups; that in some cities they use a mixture of diphtheria toxin and castor oil soap; that there is considerable discussion as to whether a toxin-antitoxin prepared from goats should not be used in place of toxin-antitoxin prepared from horses; that in several countries a toxoid is used and that in Austria the use of toxin-antitoxin is forbidden.

Suppose they were to tell the public that in the Illinois Training for Nurses that *fourteen cases* of diphtheria developed among the nurses who had received *three or more doses of toxin-antitoxin*.

Suppose they were to tell the public that a ten cubic centimeter dose of toxin-antitoxin, or ten times the usual dose, would be fatal for the infant or child, according to an editorial in the Journal of the Michigan State Medical Society, December, 1924; that the United States Public Health Service describes the ideal toxin-antitoxin mixture as one which when five human doses are injected into each of five guinea pigs, two of the guinea pigs shall die acutely and the other three shall die of diphtheria paralysis in from fifteen to thirty-five days; and that a number of cases are on record where disastrous results have followed the use of toxin-antitoxin or toxin mistaken for toxin-antitoxin.

Suppose they were to tell the public that the excitement about rushing diphtheria antitoxin to Nome, Alaska, a few years ago was one of the greatest *press-agent stunts* ever pulled in the history of medicine and that a prominent American concern of manufacturing chemists, interested in "putting over" the use of serum in fighting diphtheria, was sponsor to this gigantic publicity stunt, according to Bonns and Carrier in their book entitled "Putting It Over."

Suppose the health officer in El Dorado, Arkansas, and in other cities where school children are being inoculated against scarlet fever were to tell the people as stated in an article in The Journal-Lancer, Minneapolis, Minnesota, February 15, 1928, that "The status of scarlet fever prevention is at present in a state of unhappy confusion" that it was thought that the scarlet fever problem was solved and then it was found that "Certain patients with negative Dick tests later acquired scarlet fever"; that after a negative Dick was obtained certain individuals acquired scarlet fever, and that with the original Dick toxin they encountered very severe reaction, headache, nausea, fever, sore throat, and a scarlatiniform rash.

Suppose health boards were to tell the people when seeking to promote the use of vaccination against typhoid that "Sanitarians, with their pasteurization, their chlorination, their food coverings, their screenings, their elimination of toilets from backyards, the elimination of horses by the automobile, altogether did what it was hoped the typhoid immunizing agent would do." according to Dr. John Dill Robertson, former Commissioner of Health of Chicago, in the Illinois Medical Journal, July, 1926.

Suppose health boards were to tell the public that when nearly 100 American medical men were expected in Mexico at the end of April, 1926, arrangements were made for allowing them to enter the republic *without vaccination*, whereas 130 members of the Dallas, Texas, Chamber of Commerce cancelled their trip rather than submit to vaccination.

Suppose health boards were to tell the public that tetanus following vaccination is always to be feared, as brought out in an article in the Journal of Infectious Diseases for November, 1927.

Suppose they were to tell the public that all the guarantee they can give for vaccination is to be vaccinated whenever there is an epidemic of smallpox because if vaccinated earlier the alleged protection may have vanished and if you wait until there is an epidemic it may be too late.

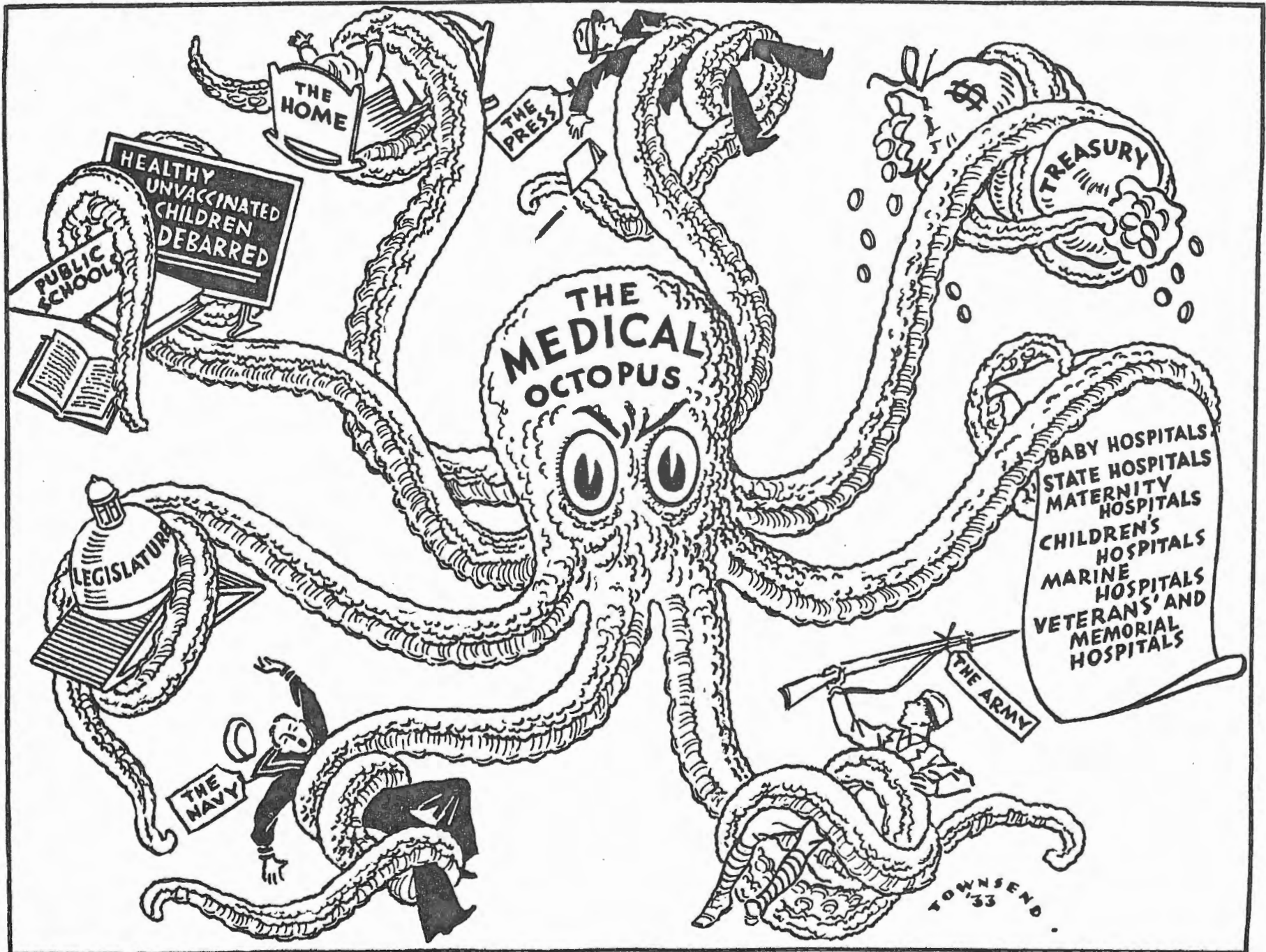
Suppose they were to tell the public that according to the 1917 report of the Census Bureau the only reason for giving data on the subject of smallpox is to show how few deaths have occurred from the disease in recent years. The only way health boards can make it appear that smallpox at the present time is dangerous is by reporting cases of Cuban itch, Philippine itch and other forms of so-called alastrim as smallpox.

Obviously, if health boards tried to tell the public the truth about vaccines and serums they would be criticized in medical circles for interfering with the practice of medicine and if health boards continue to misrepresent the facts about these treatments they will be criticized in medical circles because of the nation-wide reaction of the public. The proper thing for health boards to do is to stop using their high offices as an adjunct of medical societies and center their attention upon sound public health measurers.

--By Citizens' Medical Reference Bureau, N. Y. City

THE DREAM OF THE MEDICAL OCTOPUS

COMMITTEE FOR MEDICAL FREEDOM
11 Beacon St., Boston, Mass.



IF THE PEOPLE DO NOT WAKE UP — HIS DREAM WILL COME TRUE

CHARITY FUNDS FOR MEDICAL PROPAGANDA

The following is a letter by H. Eugene Gardner, Attorney-at-Law of Glenside, Pennsylvania, written to Dr. Morris Fishbein, President of the American Medical Association, Mr. C. Fredrich Brice of the Cancer Control Center in Philadelphia, and George E. Letchworth, Jr., of the United Charities Drive in Philadelphia, under date of March 30, 1941. We Quote:

Gentlemen:-

I recently received from you in the mail letters requesting contributions to the several activities in which you appear to be interested.

You, Dr. Fishbein, say "Keeping or losing your health depends largely on you. After all, isn't lack of understanding one of the primary reasons for ill health and sickness?"

And you, Mr. Brice say "If you -- or anyone dear to you should develop Cancer or a similar disease you would realize only too well the vital need for expert care." And you further say "How much more hopeless the situation would be if you had no funds for medical care -- for an affliction which requires special treatment for a long time."

And you, Mr. Letchworth, request a contribution for the United Charities' Fund in Philadelphia -- a fund, I am informed, raised in the name of "Charity and used to a very considerable extent to help finance and carry the over-crowded medical profession in its work of combating ills brought upon humanity by such practices as vaccination and inoculation against Smallpox and other diseases.

It may be that you do not know what vaccination and inoculation are -- it may be that you do not know that these practices consist of putting the putrid discharge from the running sores of diseased persons and animals and other diseased human and animal substances into the blood-stream of healthy persons, contaminating it so that in the case of persons susceptible to particular diseases, one disease or another may result either immediately or at some time in the future. And to make these putrid substances, great cruelty is practiced upon animals by diseasing them, causing them untold pain and suffering and eventually killing them uselessly with disease. These practices sow the seed of Infantile Paralysis, Tetanus, Syphilis, Cancer, Consumption and other loathsome diseases.

The vaccine makers contend that their product isn't so harmful because it comes from a calf after originally coming from a human being, believing apparently that calf pus is not so bad as human pus after the human pus has been smeared into the calf and has festered on the calf into calf pus. But there are reasons why calf pus is a worse substance to introduce into the human circulation than human pus (or human cellular substance), for observe: The calf cells multiply 15 or 20 times as rapidly as human cells. These calf cells introduced into the human circulation are not digested as they would be if taken into the stomach -- they remain living cells indefinitely. *Killing the calf does not at once kill the cells of the animal as many Biologists will testify.* Thus getting into the circulation, the foreign cells are carried through lymph ducts to glands and there deposited. Should they retain life and subsequently multiply as they undoubtedly do in many cases, they multiply

according to their nature, rapidly -- causing bunches, Tumors, Cancer, and other morbid growths that have had their most rapid increase since bovine vaccines have become the rule. All vaccination is unphysiological -- a crime against Nature.

Out of what hell of research could the idea of such grafting have sprung but from that lowest region where misnamed doctors combine disease cultivation with animal torture and carry it on as their life work?

These practices have been made legal in some of our States just as Slavery was legal before the Civil War. But as Abraham Lincoln said: You can fool some of the people all of the time and all of the people some of the time, but not all the people all the time." The people for the most part have been fooled and misled -- either ignorantly or intentionally -- but they are waking up and sooner or later these practices are going to be made illegal and are going to be stopped. No longer will it be required by law that a man or his child submit to a medical practice or operation which may induce a disease to which he is susceptible, depriving him of his life, his health or his bodily security. Sooner or later either by Court decision or Legislature these practices are going to be relegated to the oblivion to which have gone other ridiculous practices of the medical profession in times past.

This is not a condemnation of you, Gentlemen, to whom this letter is addressed nor of any person in the medical profession or elsewhere -- it is purely and simply a condemnation of practices which do not belong in a civilized nation or in any nation for that matter of fact where each person should have a right to choose whatever type of treatment or whatever kind of practitioner he desires * * *

The fight has been carried on to some extent for some time past, but at present it is increasing to the point where it is going to result in abolition of these pernicious practices just as the fight against Slavery gradually acquired momentum and eventually resulted in the abolition of that evil in the bloody but salutary Civil War.

Why doesn't the medical profession come to its senses and abolish the compulsory feature of vaccination and inoculation? Why don't they show their faith in these practices to confer immunity by letting those who desire vaccination have it and leaving those who don't desire it go without? If those who favor it really believed that it makes them immune, they would have nothing to fear from unvaccinated persons. But no, they don't have sufficient faith in the practice to protect themselves, and as a matter of fact, they claim for these practices the credit which belongs to improvements in sanitation, food, water supply and living conditions for better health generally and freedom from epidemics.

If these filthy practices would be discontinued there would be no need for the over-crowded hospitals and public institutions and no longer would it be necessary to dig into the Public Treasury and into the Taxpayers' money to combat Syphilis, Tuberculosis, Cancer and other diseases as is being done at the present time. And no longer would it be necessary to make heart-stirring appeals and purloining appeals for sufferers from Infantile Paralysis, Lockjaw and Insanity.

God help us if we don't put a stop to these practices before it becomes too late!

Yours truly,
H. EUGENE GARDNER

COMMERCIALIZED "PHILANTHROPY"

It is our firm and honest belief that the influence and results of medication in general, including vaccination and inoculation, are so opposed to natural law, and therefore detrimental and dangerous to the welfare of humanity that, if allowed to run their natural course, these practices would have long since been condemned and discarded.

Why then do such practices continue? What is the force which provides for the propagation and enforcement of such nefarious practices on people who would be much better off without them?

Probably no better example of the commercial forces behind medicine can be found than the Rockefeller interests, who are purported to control 82% of all the drug stock in the United States, and a goodly portion elsewhere in the world. Oddly enough, the public at large knows only of the Rockefeller oil interests; the Rockefeller string-pulling, behind-the-scenes control of medicine is zealously guarded from public observation. There is good reason to believe, however, that the Rockefeller interests have made more of their millions from chemical and drug manufacture than from oil production itself!

Let us look behind the medical "front" for a moment at the Rockefeller "philanthropies". There are three: The Rockefeller Institute for Medical Research, the General Education Board, and the Rockefeller Foundation, organized in the order named. Through them control reaches into manufacture and sale of drugs; into the public "charities" which dispense "free" drugs and medicines; to business and legislation; and perhaps their most evil effect of all is the finger of control which reaches into the medical as well as general educational institutions of our nation.

Upon the latter we will elucidate. The following quotation is from the book, "Your Life is Their Toy" by Emanuel M. Josephson, M. D., published by Chedney Press, New York City:

"CONTROL OF EDUCATIONAL INSTITUTIONS GAINED"

"The progress made by the Board (i.e., the General Education Board mentioned above) was disclosed in an article in the New York Globe on March 28, 1919, by Dr. W. S. Spillman, formerly Federal Farm Management Chief, as follows:

' . . . I was approached by an agent of Mr. Rockefeller with the statement that his object in establishing the General Education Board was to gain control of the educational institutions of the country so that all men employed in them might be *'right'*. I was then informed that the Board had been successful with smaller institutions but that the larger institutions had refused to accept the Rockefeller money *with strings tied to it*. My informant said that Rockefeller was going to add \$100,000,000 to the Foundation for the express purpose of *forcing his money on the big institutions.*'

"The Board eventually succeeded in gaining control over almost every school, college and university in the country. They found

it hard to resist the lure of the jingle of ready cash. They were forced to turn over to the Board power of dictation of their *personnel and curriculum*. Senator Kenyon, of Iowa, reported this to the U. S. Senate in January, 1917."

What, in simple language, does this report mean? It means that the Rockefeller interests "endowed" medical and general educational institutions with huge sums of money so that they in turn might control *what was taught, who taught it, and how it would be taught*. In this way public, private and other "educational" institutions become simply *instruments of propaganda for the medical manufacturers*. Their instructors become mere puppets. They must teach not what they believe is true, but *what they are paid to teach* by the medical manufacturers whose financial "endowments" pull the strings.

And what are the dividends to the Rockefeller and like interests? Dr. E. M. Josephson points them out in his "Your Life is Their Toy":

"GENERAL EDUCATION BOARD DIVIDENDS"

"The direct dividends derived from the activities of the General Education Board were many, including:

"Favorable publicity for the founders and advertising of their interests that was worth millions.

"The power to influence public opinion and the policies of the Government by propaganda distributed through the schools, colleges and universities.

"Control of researches and discoveries and their application and profits.

"The power of voting the stock holdings of the institutions which they control and of dictating the expenditure of their funds.

"The power of appointment of personnel of the institutions which can be converted to the uses of nepotism and favoritism."

These great financial interests *could be* benevolent instruments for human welfare, but instead their fingers of greed reach into and pollute every otherwise authentic human health program. The vaunted researches and discoveries of the Rockefeller Institute have been few indeed in comparison with the large sums of money expended. And in a large proportion they have later been proved unfounded. But nevertheless, the great medical and political pressure continues, to protect the reputations of the pseudo-discoverers and of the Institute. And the "discoveries" are financed in proportion to the profits they provide from the sale of drugs and medicines.

The Rockefeller Foundation functions mainly as a "tax-exempt business-relations agency and super-diplomatic corps". Through it, big business gains entry into many governmental circles from which its interests would otherwise be excluded.

They are thus able to gain favorable legislation and privileges that result in a virtual medical "trade monopoly", to the detriment of the masses, *AND THEY DO IT UNDER THE GUISE OF PHILANTHROPY!*

If ever the blind-fold is stripped from the eyes of the human guinea pigs; if ever the sham of medical "research" is exposed, and American educational institutions are left free to teach health *TRUTH* in place of *propaganda*, then we are bound to see a revolution in the healing arts that will be widespread and all-inclusive. Then *natural* healing methods will come into the place which their value rightfully deserves. And human health and longevity will be the beneficiaries.

In all this we do not indict the medical practitioner as an individual. He is but a puppet, an advance salesman for the greed of the medical manufacturer; he practices the perversion he is taught *in the schools paid to teach it*. If he refuses to do so, he is ostracized by his profession, and if he takes his own "medicine", he pays the penalty.

There are a few exceptions, men in the healing arts courageous enough to fight the overwhelming tide of medical-manufacturers' influence. But their punishment for adhering to what they know is true is meted out with a harsh and heavy hand.

It is upon the shoulders of the thinking people of our nation, and the human guinea pigs of the medical manufacturers, to correct the condition: to insist upon their Constitutional right to health and life through the practitioner and method of their own choosing.

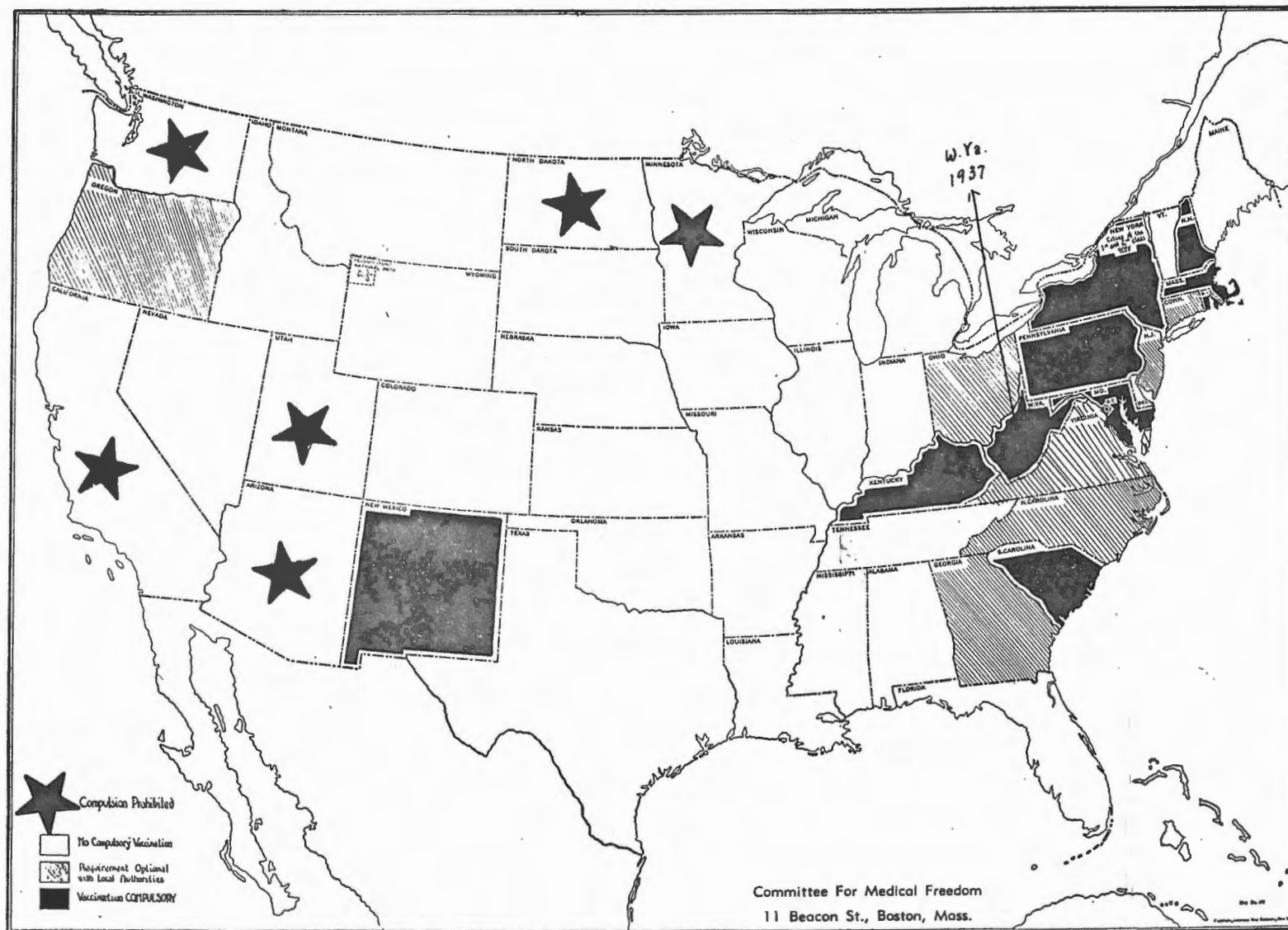
DR. HUGH B. LOGAN

LEGAL STATUS

IN

VARIOUS

NATIONS



NEW MAP OF THE UNITED STATES

10 BLACK States and the District of Columbia are under **COMPULSORY** Vaccination Statutes.

7 Striped States' Legislatures delegate their lawmaking power to unnamed "Local Authorities" and leave it "Optional" with them.

31 WHITE FREE States have **NO COMPULSORY** Statutes!

SIX of these FREE States go further and **FORBID COMPULSION** by Statute. These are the GOLD STAR STATES.

The United States has **NO** federal statute governing vaccination and inoculation.

VACCINATION RECORDS IN VARIOUS COUNTRIES

MEXICO

In the ten-year period 1921-30 inclusive, Mexico had 96,526 fatalities from smallpox against only 3,483 fatalities from smallpox in the United States. In Mexico the sanitary code of 1926 prescribed compulsory vaccination at birth, and re-vaccination every 5 years. In the United States, on the other hand, only 9 states have required vaccination; 6 have local option.

ENGLAND REPUDIATES COMPULSORY VACCINATION

England, the home of vaccination, modified her compulsory vaccination law of 1853, in 1898, and again in 1907, after the report of the investigation of the Royal Commission of Vaccination. Today *vaccination in England is optional.*

Since 1930, the incidence of smallpox in England has steadily fallen and in 1933 was at a very low level - only 631 cases and 2 fatalities being reported in 1933. Less than one-half of infants are now being vaccinated following the passage of a conscience clause which has the effect of making vaccination optional.

JAPAN

Japan is a favorite example of the "blessings" of vaccination. In Japan, under the law of 1874, strengthened in 1885, vaccination is compulsory during the first six months of life, again at six years, still again at fourteen, and after this whenever smallpox occurs. For all males there is still further vaccination on entry to the army or navy. The law is strictly enforced and complied with, there being, as stated recently as 1906 by Surgeon-General Takaki, no anti-vaccinists in Japan. Of this paradise of vaccination it is said: "Smallpox, once the scourge of the island, is now all but unknown."

Nevertheless, the official statistics of the Sanitary Bureau of Tokyo, from 1889 to 1908, show that there were 8500 a year, with 48,000 deaths - a mortality of 28 percent. And in 1908, when the Empire should have been reaping the best fruits of its rigorous vaccination laws, the smallpox cases numbered 18,000 - a number not exceeded since 1897 - and the deaths were nearly 6000, or over 32 percent. *Eighteen thousand cases, and "smallpox almost unknown"!*

The Pennsylvania State Vaccination Commission

HOLLAND

Vaccination is not compulsory in Holland but is required for entrance into a school.

AUSTRALIA

There is no compulsory vaccination in Australia and New Zealand and has not been since 1919. *Smallpox is practically unknown there.*

In Australia and New Zealand less than 1 percent of the infants are vaccinated nowadays and smallpox is practically extinct. Australia has reported only five deaths from smallpox in 10 years.

SCOTLAND

The compulsory vaccination law of 1855 was rigidly enforced until 1874, yet 9,087 children under five years of age died of smallpox. Since 1907 - owing to the conscience clause - only about 1/3 of the children are being vaccinated and from 1907 to 1919 there were only seven deaths from smallpox among children under five years of age.

SMALLPOX IN THE RUSSIAN ARMY

A dispatch from Helsinki to the "Birmingham Post," 19th December, 1939, included a reference to a smallpox epidemic in the Russian Army in Finland. The Press Association and Exchange correspondents said:

"Smallpox has broken out amongst the Russian Army. Reports reaching the capital state that the outbreak is spreading rapidly, and has already reached the proportions of an epidemic. Finnish soldiers, together with all persons living in the frontier regions, are being hastily revaccinated. All vaccine available has been requisitioned, and a public proclamation called for the wholehearted cooperation of the public in all measures taken by the Government is expected shortly."

Seeing that vaccination against smallpox is compulsory in Soviet Russia and in the Russian army, and has been so stringently enforced in Finland that the 70-year-old editor of a Nature-Cure magazine has been sent to prison for publishing arguments against the practice, *why is there any epidemic of smallpox in Finland?* And why all this hasty revaccination when there has already been so much vaccination and revaccination in Russia and in Finland.

The "Truth-Teller," March, 1940

UNITED STATES

Only 9 states have laws that require vaccination for admission to public schools: District of Columbia, Maryland, Massachusetts, New Hampshire, New Mexico, New York (in cities of 1st and 2nd classes only), Pennsylvania, Rhode Island and South Carolina.

Vaccination of children during infancy is required by law only in Kentucky and Maryland.

It is optional with local authorities whether or not they require vaccination for admission to public schools in Connecticut, Georgia, New Jersey, North Carolina, Ohio, and Oregon.

In other states local authorities have ruled vaccination a requirement for admission to public schools but in most cases the courts have ruled this action illegal, except during times of epidemic, without specific authority from the legislature.

(Information from H. B. Anderson in "Facts
Against Compulsory Vaccination")

OUR

CONSTITUTIONAL

RIGHTS

CONSTITUTIONAL RIGHTS

Extract from the "Declaration of Independence," made by the Original Thirteen United States of America, on July 4, 1776:

"We hold these truths to be self-evident, that all men are created equal, that they are endowed, by their Creator, with certain *inalienable rights*, that among these are *life, liberty*, and the *pursuit of happiness*. That to secure these rights, governments are instituted among men, deriving their just powers from the consent of the governed, that whenever any form of government becomes destructive of these ends, it is the right of the *people* to alter or to abolish it, and to institute new government, laying its foundation on such principles, and organizing its powers in such form as to them shall seem most likely to effect their safety and happiness."

Extracts from the Constitution of the United States of America:

"We, the people of the United States, in order to form a more perfect union, establish justice, *insure domestic tranquility*, provide for the common defense, *promote the general welfare*, and secure the blessings of liberty to ourselves and our posterity, do ordain and establish this constitution for the United States of America."

Amendments to the Constitution of the United States:

Article XIV--Section 1--"All persons born or naturalized in the United States, and subject to the jurisdiction thereof, are citizens of the United States and of the state wherein they reside. *No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any state deprive any person of life, liberty or property, without due process of law, nor deny to any person within its jurisdiction the equal protection of the laws.*"

COMPULSORY VACCINATION IS UN-AMERICAN

When the founders of this Nation drew up the Constitution, it was intended that the Immortal Document should protect the masses, as well as the individual, from the oppression by corrupt, powerful minorities. Provision was made for the protection of personal liberties, property rights, and the freedom to worship God according to the dictates of conscience, or not to worship at all, if the individual should choose.

But one important provision was omitted from the document, provision against the meddling, in public and private affairs, of the most meddlesome group of men who ever trod the face of God's green earth -- Organized Orthodox Medicine. This omission, whether by accident or design, has caused more grief, suffering, mutilation and death than have all the wars in which this nation has engaged. And the end is not yet - unless this "oversight" is corrected.

Organized medicine is, strictly speaking, a purely private enterprise, engaged in the *business* of treating the sick, for a fee, just as a railroad or steamboat line is a private enterprise, engaged in the business of transporting people and goods, for a fee. In both cases, competition is frowned upon and laws are sought to stifle competitors, or to "regulate" them out of business.

Long ago our lawmakers recognized the dangers of private monopolies in restraint of trade and commerce. Drastic laws were enacted against some monopolies, and the courts have held valid most of these enactments. But our courts, for some unknown reason, allow orthodox medicine a free hand in driving competition from the field and establishing for itself an almost complete monopoly in the *business* of treating the sick and the control of public health. And this in spite of the fact that there are tens of thousands of legally recognized, well-qualified unorthodox medical practitioners in the field.

With our legislatures and courts under the almost complete domination of organized medicine, it is practically useless to expect any measure of freedom from medical oppression. Intimidated judges interpret, "very liberally," the police powers of the State to the end that the organized medical profession, through the medium of local health boards, foist burdensome and vicious "rulings" upon the people,--such as "preventive" campaigns against smallpox, diphtheria, infantile paralysis, venereal diseases and so on.

If the American people hope to maintain their independence, this type of fascism - medical fascism - must be stopped * * * prohibited by constitutional amendment!

--American Medical Liberty League
Chicago, Illinois

The compiler believes that a shorter, more logical, and less expensive course is to obtain a supreme court decision, since many of the best minds believe that the Constitution of the United States, as written, *guarantees all these rights*, which have been largely taken away through the *mercenary tactics of medical manufacturing profiteers*.

It is obvious that these transgressions of the public rights, by the medical manufacturers, through their trained agents, the medical doctors, are of no value and in fact detrimental, as proven by the short lives and poor health of the medical man himself.

Judge Robert I. Marsh counsels:

"Keep in mind and stress to others the fact that the rights for which we have been striving all these years **ARE ALREADY OURS!** That these Rights are "Inherent" and "Unalienable" rights; ours from birth, even if the Constitution had never been written!

"The right to the "freedom" and "security" of our person - "The right to be let alone"- are the most important rights we have."

Daniel Webster:

"Compulsory vaccination is an outrage and a gross interference with the liberty of the people in a land of freedom."

Dr. Benjamin Rush, a most distinguished physician of his time, a signer of the Declaration of Independence, urged Thomas Jefferson, at the time the United States Constitution was being drawn, to place a Medical Liberty as well as Religious Liberty clause in that Constitution, saying, *"Without Medical Liberty, Our Independence is Vain."*

Clarence Darrow, noted criminal attorney, in his book "The Right to Live":

"I know that the doctors, like everybody else, take themselves very seriously. I know that the effort of the medical profession in the United States to control the treatment of human ailments is not due to love of human life; it is due to its love of its job, which job it proposes to monopolize for itself. I know that the doctors have been carrying on a vigorous campaign against new methods and schools because they want the business and they insist that *nobody shall have the right to live or die without their services*. I know that doctors dose the people with medicines which they do not believe in themselves. I know that doctor's families use few drugs. I know that they have specifics to prevent one taking almost any disease, yet not one of them can tell you how the prevention is brought about. I know that they would vaccinate people for smallpox, and there is not a doctor that can explain, nor can he prove it does prevent it. And they are not content to vaccinate the people who come to them, but *they ask the State to pass laws to compel everybody to be vaccinated!*"

Copied from "Your Life is in Their Hands", Cash Asher

TYPICAL ATTEMPTS TO WITHHOLD EDUCATION, EMPLOYMENT OR FOOD AS A MEANS OF FORCING VACCINATION

From H. B. Anderson of the Citizens' Medical Reference Bureau, in "The Facts Against Compulsory Vaccination":

"Be Vaccinated or Get Fired" -- Copy of editorial from the St. Louis (Mo.) Star, May 24, 1926:

"A new form of compulsory vaccination has come to light in that vaccination has begun on about 1200 employees of the Chicago & Eastern Illinois Railroad, and it is announced that employees who refuse to be vaccinated will be the first laid off when forces are reduced. It is hard to conceive of a big successful corporation taking such a narrow-minded action. Vaccination numbers among its opponents hundreds and thousands of laymen and many doctors of unquestioned standing. It is bad enough for School Boards and other civic agencies to force those that do not believe in vaccination to submit to it, but for a private corporation to take upon itself such duties is incompatible with the American idea of liberty."

Childs Case to be Taken To State Supreme Court

Appeal from District and Superior Court Decisions Will Come Up Soon for Ruling on Point of Law

Boston—Staunchly defending their rights, the parents of these children, Harano and Althea Childs of Quincy, Mass., age 13 and 9, will continue the legal battle to determine once and for all the constitutionality of compulsory vaccination in the public schools. Driven to Maine for their schooling, these children a year ago excited national support when they were sent home twice daily by the Quincy school authorities because they had not submitted to the vaccination required of all pupils.

Objecting not only on the grounds of private rights but because vaccination was "a medical racket which records prove poisonous and sometimes fatal", the forthcoming test case is expected to be historic.

The law which states that all children must attend school and yet further compels pupils to be vaccinated unless granted a certificate of exemption, met with embarrassment last January when the children of Mr. and Mrs. Harry Childs stopped presenting Principals Theodore Silva and Harry Prario with such exemptions. Mrs. Childs pointed out that three sets of physician's certificates had been provided at intervals of two months by a doctor, stating that vaccination would endanger their health. But the expense of renewing them so often was too much.

"Particularly," she said, "when I find that in some instances in Quincy one certificate has been sufficient to cover a child's school life, sometimes one a year, is asked for."

It will be remembered that when the Childs' case was reported in the press from coast to coast, even finding cordial reception in England where opposition to vaccination is powerful, (optional since 1907) the Secretary of the Citizens' Committee Against Compulsory Vaccination in Boston went to the aid of the harassed family.

Fines Reduced

After nine-year-old Althea and six-foot Harano had been repeatedly turned away from the

door of their schools, and debarred, court action was taken by the School Committee. Mr. Childs was brought to the Criminal Court charged with "failure" to have his debarred children in school. He pleaded "not guilty".

"We faithfully complied with the school attendance law and sent our children to school each day," he stated before Judge Kenneth Johnson. "They were debarred and told not to come again. We shall appeal to a higher court on points of law." He was fined the maximum fine of \$20.



Harano and Althea Childs

Mr. Childs refused to pay the fines and was locked up until bonds were furnished. He held that he was not in violation of the School Attendance Statute, his children went to school and were debarred. He was brought before the court three times, the fines totalling \$60.

The case was appealed each time and after weeks of delay was heard in the higher court at Dedham, Judge Frederick W. Fosdick reduced the maximum fines from \$60 to \$3.

Soon the Supreme Court will be called upon to render a decision which may, according to the growing body of anti-compulsory vaccination supporters, go far toward moving the Com-

monwealth of Massachusetts up into the group of 39 states which do not compel vaccination.

Harry Childs remembers taking 11 shots of various serums while in the U. S. Army. He was violently sick and to this day his health suffers. Scenes of mass inoculation followed by mass illness, including a percentage of fatality, burnt deep the determination to examine what truth lay behind this orgy of medical needle sticking.

Mrs. Harry Childs recalls being seized as a child and "vaccinated into sickness". She too decided that perhaps this prac-

tice of loading one's blood stream with disease poisons in order to prevent contracting it later might be as great a fallacy as the old delusion of arm to arm inoculation.

With two vigorous children to care for, these parents dug out the facts on the subject of vaccination for themselves before allowing Althea and their son Harano to be pumped full of virus.

Published by the
COMMITTEE FOR MEDICAL
FREEDOM

11 Beacon Street, Boston, Mass.

Extracts from conferences of health officers at Lansing, Michigan, December 12, 1923, published in "Public Health", April, 1924 issued by the Michigan Department of Health:

"Dr. Slemons: . . . 'The children in our schools are given slips--you will find one of them in the exhibit, in the auditorium --notifying the parents that the child is not vaccinated. *While the slip does not exactly demand vaccination, as you will find upon reading it, most people think it does and by using it we get a very high percentage of vaccinations because our people have gotten to believe that this is compulsory.*'

* * *

' . . . On any slight pretense of exposure we demand vaccination. How far do we go? *We go just as far as we can.*'

* * *

'By taking advantage of any secondary exposure you will be able to keep 100 percent of the children in your schools vaccinated. Here is a point that we have found extremely beneficial-- *we penalize the non-vaccinated person every opportunity we get.* I mean by this that any non-vaccinated person exposed to smallpox is looked upon as a potential case of smallpox and that person goes home and stays there for sixteen days, while a direct exposure when vaccinated gets every consideration, and at the end of a seventy-two hour period goes back to the public. *It has a very wholesome effect.*'

"Dr. Godfrey: 'In our city unvaccinated children even though they are not exposed to contagious disease, cannot come to school until they are vaccinated . . .

'Unvaccinated children are turned over to the school board, and excluded from school and then as soon as the records show that they aren't in attendance at school, they are arrested for non-attendance. In other words. *we get them going and coming.*'

* * *

"Dr. Town: 'Penalize the fellow who refuses to cooperate, you will find this is pretty good medicine.

'In Jackson we have not gone into any factory or school and put on a program of vaccination unless pretty definite report of exposure has come in, because when we do go we go to the limit, and interpret 'exposure' in its loosest term. We have railroad shops where we vaccinated 1500 men as soon as it was reported that one man had worked five days with an eruption. We interpreted this as wholesale exposure, and secured authority from their Detroit office to do the work. Incidentally, we were very glad to have their regularly employed physician and surgeon handle the vaccinations.'"

Extract from syndicate article by Harris Dickson, published in Savannah (Ga.) News, June 14, 1927:

"A drag net, drawn at random through the flooded area, catches queer fish. The Baton Rouge haul recently pulled in eighteen members of a certain small sect who refused to be vaccinated or take the typhoid serum, because, they insisted, it was against their religion. Surgeons attempted to persuade them.

"Do this for your own protection, as well as for the safety of a generous city that shelters you.'

"Not much." Altruistic arguments never touched them.

"Well', the Red Cross man was trying not to become a very cross man, 'Does your religion forbid you to eat?'

"Eat? Free rations? Oh, dear, no. Breakfast, dinner, and supper constitute Articles One, Two, Three of their creed. They believe in substantial food.

"Fine!' the Red Cross official snapped, 'From now on your meal tickets are cancelled until you can show your vaccination scars.'"

COURT DECISIONS RENDERED

Judge Bartlett, of the New York Supreme Court, in the case of Walters in 1894, decided that:

"To vaccinate a person against his will without legal authority to do so would be *an assault*."

Judge Woodward, of the New York Appellate Court, in the Viemeister case in 1903, declared that:

"It may be conceded that the Legislature has no Constitutional right to compel any person to submit to vaccination."

Judge Fitts, in the Supreme Court of Columbia County New York, in the case of Bollinger in February, 1909, charged the jury as follows:

"I charge you, gentlemen of the jury, that the courts of this State in construing the authority and power so conferred upon the local health officers who are the executive members of the board or the local boards, have held that there is no warrant or authority in law for the compulsory vaccination of any individual."

At the second trial of this case in February, 1910, Judge LeBoeuf charged the jury in these words:

"Now, I have charged you that this assault which is claimed to have existed here, due to the forcible vaccination, if it was a forcible vaccination, this is, if it was against this man's will, is one which you must consider. And the reason of that is this: This man, in the eyes of the law, just as

you and I and all of us in this court-room, has the right to be let alone. We all have the right to the freedom of our own persons and that freedom of our persons may not be unlawfully invaded. That is a great right. It is one of the most important rights we have."

Supreme Court of the State of Massachusetts, in the case of Jacobson in 1904, said:

"If a person should deem it important that vaccination should not be performed in his case and the authorities should think otherwise, *IT IS NOT IN THEIR POWER TO VACCINATE HIM BY FORCE*, and the worst that could happen to him under the statute would be the payment of the penalty of five dollars."

The Supreme Court in the vaccination case of Jacobsen vs. Massachusetts, in 1905, on appeal from the Supreme Court of Massachusetts, rendered the following decision:

"There is, of course, a sphere within which the individual may assert the supremacy of his own will and rightfully dispute the authority of any human government, especially of any free government existing under a written constitution, to interfere with the exercise of that will."

AUTHORITIES' OPINIONS ON CONSTITUTIONAL RIGHTS

Copied from "The Facts Against Compulsory Vaccination", by H. B. Anderson of the Citizens' Medical Reference Bureau, New York City.

Dr. Walter N. Dickie, Secretary of the California State Board of Health, in the Bulletin of the Public School Protective League, Los Angeles, California, May, 1923:

"There is no doubt that many doctors in the medical profession would like a strict compulsory vaccination law for California, but the tendency now is to accept the undeniable rights of the individual to choose for himself and for his children that particular mode of treatment which in his judgment will best promote health and happiness."

Former Governor Percival P. Baxter of Maine, from inaugural address, January 4, 1923:

"It is fundamental that each person is entitled to choose his own school of medicine or of treatment just as he may choose his politics or religion."

Dr. Frederick R. Green, former Secretary, Council on Health and Public Instruction, American Medical Association, September 30, 1914:

"Another error into which we have fallen as a profession is the tendency to regard the medical profession as a divinely authorized class, whose sacred and distinctive function is the protection of the people either with or without their consent. It is difficult to understand on what rational basis such a belief can rest in a scientific profession like ours. The medical profession is recruited from the same class as that which furnishes the lawyers, judges, ministers, teachers, and business men of our country. The men who go into medicine are neither wiser, more unselfish, more upright or more infallible in their judgment than those who make up any other class of professional men. Why should we regard ourselves as of superior mold, or why expect our opinions or views to be accepted on any different basis from those of other men of equal intelligence, except in so far as we are able to justify our judgment. Yet too often medical organizations, as well as individual physicians, have taken the position that they were the courts of last resort, that it was their special function to dictate the terms of public health legislation, and that it was the duty of the public to accept their decisions and acquiescence in their judgment."

W. S. Thayer, M. D., Presidential address before the Annual Meeting of the American Medical Association, June 12, 1928, published in the Journal of the American Medical Association, June 16, 1928:

"In the broader matters of public health the public has the same right, after seeking what advice it will, to take just what action it chooses. It is our privilege to be in a position where individually and collectively we are especially qualified to advise the public in these matters. This privilege implies a heavy responsibility. We must seek to direct the public toward sane and efficient action. But we must remember that neither as individuals nor as an association have we the right to demand that the public accept our views."

Editorial, Journal of the American Medical Association, February 15, 1919:

"It is not the function of the medical profession to maintain lobbies or to endeavor to secure public health measures by political methods. The true function of the medical profession is to advise the people, to show them how to protect themselves. The doctor's mission is to be a teacher and not a political manipulator. The responsibility for public health conditions must rest with the people and *not with any special class or profession*. The sooner these general principles are recognized, the better it will be for the medical profession and for public health advancement."

Vaccine Foes All Over World Rally to Oft-Arrested Father

In Paris, in South Africa, in Western States, They're Planning Aid for Defiant Carlisle(Pa.) Man.



JOHN MARSH AND EUGENE, 8.
" . . . never, with my permission."

By CHARLES FISHER
Record Staff Correspondent

CARLISLE, March 12.—In Paris, a woman who never heard of this red brick Pennsylvania town grew distressed because John Marsh was in jail.

So did men and women in Texas and California and Northern Maine and the State of Washington. In Capetown, South Africa, a movie audience saw him, in his blue overalls and tan Sunday hat, and began pondering his problem. Two State courts and the Commonwealth of Pennsylvania have already become officially concerned with it.

And sooner or later, it is almost certain the United States Supreme Court will have to decide whether or not John Marsh, of Broad Mountain, need have his 8-year-old son vaccinated.

Court Test Due.

The question posed by John Marsh simmered here for more than four years. It's boiling now. Event-

ually, it will result in what lawyers believe is the first clean-cut test of Pennsylvania's compulsory vaccination act since the law was passed in 1895.

Because Marsh, who spent more than a year in jail at various times through his dread of vaccination, has become a sort of rallying point for anti-vaccination groups in all parts of the country.

The Background.

He has three lawyers and receives letters regularly from places he never heard of. His dispassionately stubborn assertion that "no child of mine will ever be vaccinated with my consent" has developed legal implications which are far beyond him and most other laymen.

The background of the case is familiar: In 1930, Marsh's brother, William, had one of his three children vaccinated. She became blind. A sister, who was not vaccinated but who slept with the sick girl, also lost her sight. The Marsh brothers blamed the vaccination. Physicians said it was not at fault.

But John Marsh, a slow-moving man of great determination, swore solemnly to himself he would never submit his younger children to the process. The older ones were vaccinated years ago, before the tragedy.

1933 Arrest.

In 1933, the South Middleton Township School Board refused to admit the younger of John Marsh's children. Marsh was arrested and fined \$5 for keeping them out of school. He refused to pay the fine and went to jail for five days.

At the end of his term he was ordered to have the children vaccinated. He refused. He was arrested again, jailed again. The process kept up until late in 1934. Marsh served 55 five-day sentences—a total of 275 days—in 33-'34.

Wards of County.

During the last term, his family applied for relief. The two children of school age were made "wards of Cumberland county"—and promptly vaccinated. Marsh was released. He still had three small children unvaccinated.

The matter was dropped by all parties until last fall, when 8-year-old Eugene was due in school. No vaccination, said Marsh. "Five days," said Justice of the Peace William Dqsh. It was the first of a new series of 20 sentences which brought Marsh's grand total to 75 terms, or 375 days.

The series ended last Sunday. Marsh was released. But he was arrested once more on Wednesday. The whole hopeless round was about to begin over again when, at his lawyers' suggestion, Marsh's father posted \$50 bail and he was freed pending action of the higher courts on his appeal.

"If I win in this," he said yesterday, "then everybody wins. I mean everybody who's against vaccination.

"I'm not stubborn. I'm not bull-headed. I don't try and say nobody should have their children vaccinated. Let other people do what they want.

"All I say is, no child of mine will ever be vaccinated with my

consent, I'm not the one making all this trouble. It's the doctors and the pus-makers" the always uses that term for vaccine manufacturers).

Wife's Stand.

What does his wife think?
"Well . . ." said Marsh, "I guess she'd go along with them, if it wasn't for me. But so long as I say no, she's with me."

"But look what they did to her and the kids while I was away. They jooksed 'em. They told her to get the kids dressed, that they were going to take 'em to see me in jail. Then they took them off to the home and wouldn't let them out. And they vaccinated two of 'em. That one boy, he's not the boy he was since then. It amounted to kidnapping, I say."

No Trouble-Maker.

Didn't he mind jail?
"Of course, I minded it. But I couldn't do anything about it. I was never in jail before this. I'm not a trouble-maker. I obeyed all the laws and still do. I lived with my neighbors here ever since I was 7. I had no trouble with anyone. But I saw what I saw. I saw my nieces go blind. And nothing is going to happen to my family if I can help it."

It's a healthy-looking family. Plump children, every one of them with gray or gray-blue eyes and a shy friendliness toward strangers.

Built Own House.

They live, not in a mountain shack, but in a solid red-brick white-trimmed house in a microscopic community called Gardners, about 15 miles from Carlisle. Marsh, who is 40, built the house with his own hands. He owns it, and a one-acre truck patch and group of sheds and work houses behind it.

He isn't a farmer. He's a carpenter by trade, but a measure of what used to be called Yankee ingenuity enables him to take a hand in anything. When he isn't in jail he makes a better than average living for the family.

If he thinks you are interested, he will show you things he has made out of scraps of metal and bits of junked cars: a complete power workshop; two tractors powered by 1922 automobile engines; wagons and farm machinery.

Spotless Home.

His workshop should be run by belts attached to a drum riveted to the wheel of an ancient car. But, when there isn't any money for gas, handles are affixed to the machines and Marsh or "the boys" spin them to make the drills and lathes turn and band-saw hum.

The house is spotless. The stove used for cooking and heating shines with blacking and metal polish. The children glisten with soap, even for unexpected visitors. Their shoes are sturdy, their coats heavy and well-mended.

"Jail or no jail," says Marsh, "I manage to keep 'em in shoes and food."

School Process.

Eugene walks along a quarter-mile of macadam road every now and then, crosses a morass of mud and dry pine needles, climbs a pile of broken stones which serve as a step and presents himself at the school.

Each time, the teacher explains he can't be admitted, and he dutifully goes home. The school is a square, white one-room building, heated by a pot-bellied stove which burns chunks of soft coal. The desks are cut and battered and the books dog-eared, but the windows

are wide and the place is bright and airy.

Teacher Won't Talk.

There are a venerable parlor organ for music and a white-enamelled cooler for water. But there is no common drinking cup; the children know about sanitation and make their own cups out of folded bits of paper.

The teacher is alert and amiable, but she won't discuss the Marshes.

Curiously, the two men who send Marsh to jail with such great regularity seem to hold no malice against him.

Magistrate's Hands Tied.

Magistrate Dosh, tall and gentle of manner, with thin white hair, says there isn't anything else he can do. A copy of the State School Code rests on his desk. To prove his argument, he turns to section 1423 of the act of March 18, 1911.

"Look at this," he says. "Violators of the law must be fined and go to jail in default of fines. They bring these cases before me and there isn't a thing I can do. I have often said to Marsh, as he was taken out, 'Don't you want a few days to think this thing over?' He has always said 'Never!' and marched away. He just seems to be one of those men who can't be swayed, once he makes up his mind."

Can't Change Laws.

W. G. Rice, supervising principal of the South Middleton schools, said he hasn't any more power than Dosh to change the law.

"We don't have Marsh arraigned for failing to have the children vaccinated," he said, "but for failing to have his children in school. And we can't admit them if they aren't vaccinated. If we did, the State appropriation would be taken away from us. And I would be liable to a fine of \$25 a day for permitting the law to be broken. We can't change the law. All we can do is enforce it."

Legal Status.

Here is an outline of the legal steps under way in the case:

1. Two weeks ago Marsh was taken before Judge Frederick S. Reese, of the County Quarter Sessions Court, in an effort to secure his release on a writ of habeas corpus. Reese refused to free him. The refusal was appealed to the State Superior Court and argument will be heard this week in Harrisburg.

2. Marsh's last sentence by Dosh was appealed to the Quarter Sessions Court. If the high-

er court ruling is adverse to the defense it will be carried still higher.

3. An injunction will be sought this week in the county court, prohibiting future arrests of Marsh on the ground his Constitutional rights are being violated. Again, if there is a ruling against the defense, there will be an appeal. And if the State loses, it is expected the State will appeal.

Defense Plans.

Right now, defense attorneys are trying to figure out a way to simplify the proceedings. The lawyers are Ralph Sheetz, of Enola; Harold R. Prowell, of Harrisburg, and H. Eugene Gardner, of Philadelphia, who is temporary chairman of the Committee for Medical Freedom in Pennsylvania.

The State Attorney General's office will send counsel to the Superior Court hearing to defend the law. Up until now the State has been reluctant to join what it hoped would remain a local fight. But, as the other appeals are pressed, it is expected the Commonwealth will have to take a part in each.

Counsel for the school board have already been in conference with the Pennsylvania Department of Justice, according to Rice.

Other State agencies are fighting shy, however.

Calls It Local.

Dr. Clarence Ackley, deputy Secretary of Public Instruction, said the problem is primarily one for local and State health officials.

"All we can say," he declared, "is that the school law obligates school officials to exclude children who are not vaccinated and provides a penalty if they do not do so. Apparently, the officials have done that."

Dr. Edith MacBride Dexter, Secretary of Health, declared:

"The Health Department feels the law should not be broken. It would be a bad thing for Pennsylvania if it were broken down. We have not had a case of smallpox here for five and one-half years. Ohio and other States without a compulsory vaccination law have had quite a few. But the problem appears to be a local one."

Marsh's status pending further legal action is a little uncertain. One school official said counsel is now seeking, from the State, advice on whether Marsh shouldn't be arrested even while he is out in bail, on the ground his offense is renewed each day school is in session.

"If that is the case," he said, "he will have the boy vaccinated, pay a fine, or go to jail again; you can make up your mind to that."

NOTE: This Article in the Philadelphia Record fails to state that the deaths and diseases caused by Vaccination in Pennsylvania, where vaccination of school children is compulsory, exceeded by many times the few victims of Smallpox in Ohio where vaccination of school children is not compulsory. Under the circumstances, is not vaccination more dangerous than the Smallpox claimed to be immunized against, especially when persons supposed to be immunized get the Smallpox and especially when an effective medical remedy which is not dangerous exists? And especially when vaccination induces in susceptible persons such diseases as tetanus, infantile paralysis, syphilis, and others resulting in death, incurable disease and invalidism?

American Medical Liberty League,

404 S. Wabash Avenue, Chicago, Illinois, U. S. A.

THE MARSH CASE

The story of John Marsh of Gardners, Pennsylvania, and his fight against the vaccination of his children is one which makes the blood of every liberty-loving American seethe with indignation. (See newspaper reprint, preceding page.)

In 1929 John Marsh saw his brother William's child vaccinated, saw her go blind, her throat break out, and when the poison struck her heart she died. He saw another of his brother's children go blind -- her eyes swelling and bursting in her head within a week after they became infected by the vaccine, leaving empty eye sockets. (See picture on page 23.) These horrors led to his resolve that never again should a child of his be subjected to the dangers of vaccination.

It was 4 years later -- in 1933 -- when one of his children became of compulsory school age, that he first faced the necessity of defending them against vaccination. Pennsylvania is one of the 9 states which still have compulsory vaccination and which requires it as a pre-requisite to admittance to public schools. Therefore when he refused to have his boy vaccinated, he was fined \$5.00. This he refused to pay and was jailed for 5 days. This procedure was repeated 55 times making a total of 275 days Mr. Marsh served in prison.

Just how long this would have continued no one knows, had it not been that the cannery where Mrs. Marsh worked during her husband's imprisonment closed, leaving the family without means of support. It was then that the family was forced to apply for relief which made the children "wards of Cumberland County" and they were promptly vaccinated without their father's consent. What must have been the resentment of that father who had lost a good job and spent 275 days in prison rather than have poison put into his child's blood stream, which would contaminate it with the possibility of blindness, syphilis, cancer, insanity, consumption or death, all of which have been known to result from and following vaccination! Nor can we imagine the rebellion which he must have felt when it became evident that one of the children thus vaccinated had never fully recovered from its effects!

No more trouble occurred until the next younger child, Eugene, became 8 years old, which is the compulsory school age. Then began a fight for the constitutional rights of this man to protect his child against vaccination, which was known even into Africa. Again John Marsh refused to have his child vaccinated, to secure admission to public school, and again he was sent to jail, losing another good job by which he had earned a substantial living for his wife and eight children. There were those who were considerably irked by his defiance and they made up their minds that they were going to break him.

He was first jailed on November 15, 1937. This time three attorneys chief of whom was H. Eugene Gardner of Glenside, Pennsylvania, came to his aid, and have battled loyally without remuneration for justice in this case. On December 30, 1937, a petition for a Writ of Habeas Corpus to secure the release of Mr. Marsh was brought before the Cumberland County Court, but the judge, without hearing argument in behalf of Marsh, refused to release

him and returned him to jail. Here he remained the most of the time until March of 1938. At that time the office of Attorney General of Pennsylvania gave out statements to the effect that the arrests would cease and that a different policy would be pursued in the future.

So, in October of 1938, after the beginning of school, the School Board of Health filed a petition in the Cumberland County Court for a warrant for the arrest or apprehension of the boy, Eugene Marsh, as a neglected minor--allegedly neglected because he had not been vaccinated against smallpox. The purpose, as therein stated, was to remove the child from his father's custody and so deprive him of the protection of his father against a medical practice which admittedly may cause irreparable harm!

About the same time John Marsh and his son filed a petition for mandamus against the School Board to admit Eugene to school without being vaccinated or to show cause why they could not do so. The petition further declared that the law whereby the School Board excluded Eugene from school is unconstitutional under the Ninth and Fourteenth Amendments to the Constitution of the United States. Judge Reese, the sole judge of the Cumberland County Court, again refused to grant a hearing and dismissed the petition upon presentation. Application for an appeal from the refusal of the judge to permit a hearing was made to the Supreme Court of Pennsylvania, but was refused. Then application for the allowance of an appeal to the United States Supreme Court was made, but this too was refused, the principal reason being that the question sought to be raised had been foreclosed by a decision on the Massachusetts Supreme Court.

So John Marsh stands today, in the United States of America which we proudly proclaim the land of human liberty and freedom!

Our Constitution provides in its Bill of Rights for such liberties as freedom of speech, of worship, of assemblage, and it goes further to safeguard our liberties in Amendment IX which reads "The enumeration in the Constitution of certain rights shall not be construed to deny or disparage others retained by the people." And again in Amendment XIV: " . . . No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States."

What right could be more vital to the people than the right to safeguard themselves and their children against having the putrid discharge from the running sores of diseased animals put into their blood streams? The practice of vaccination is condemned as dangerous by the best medical scientists in the world. Then why should a man be persecuted because, having seen its effects, he refuses to have his children subjected to such a physical hazard in order to secure their admission to public school! Mr. Gardner, John Marsh's attorney, rightly raises the question, "Is it the child or the school that is public?" If vaccination protects those who are vaccinated, then they have nothing to fear from the unvaccinated.

Compulsory vaccination is a blot upon our American freedom and it must be banished from our land, that we may have "*LIBERTY AND JUSTICE FOR ALL*", the ideal upon which our nation was builded.

 * *The New* *
 * EMANCIPATION DECLARATION *
 * *****

We must defeat the effort of the men who would make sick an entire community of well people in the fear that a small portion of it may get sick.

We must denounce the idea that a healthy person is a menace to anybody.

We must see that our children's education is not predicated on the point of the poisoned quill.

We must see to it that subcutaneous injection of an absolute poison does not take the place of sanitation and hygiene.

We must declare against superstition practiced by the State.

We must not surrender the right of personal privilege in the selection of our food, our religion, our politics or our medicine.

From Dr. Z. T. Miller of Pittsburgh, Pa.

him and returned him to jail. Here he remained the most of the time until March of 1938. At that time the office of Attorney General of Pennsylvania gave out statements to the effect that the arrests would cease and that a different policy would be pursued in the future.

So, in October of 1938, after the beginning of school, the School Board of Health filed a petition in the Cumberland County Court for a warrant for the arrest or apprehension of the boy, Eugene Marsh, as a neglected minor--allegedly neglected because he had not been vaccinated against smallpox. The purpose, as therein stated, was to remove the child from his father's custody and so deprive him of the protection of his father against a medical practice which admittedly may cause irreparable harm!

About the same time John Marsh and his son filed a petition for mandamus against the School Board to admit Eugene to school without being vaccinated or to show cause why they could not do so. The petition further declared that the law whereby the School Board excluded Eugene from school is unconstitutional under the Ninth and Fourteenth Amendments to the Constitution of the United States. Judge Reese, the sole judge of the Cumberland County Court, again refused to grant a hearing and dismissed the petition upon presentation. Application for an appeal from the refusal of the judge to permit a hearing was made to the Supreme Court of Pennsylvania, but was refused. Then application for the allowance of an appeal to the United States Supreme Court was made, but this too was refused, the principal reason being that the question sought to be raised had been foreclosed by a decision on the Massachusetts Supreme Court.

So John Marsh stands today, in the United States of America which we proudly proclaim the land of human liberty and freedom!

Our Constitution provides in its Bill of Rights for such liberties as freedom of speech, of worship, of assemblage, and it goes further to safeguard our liberties in Amendment IX which reads "The enumeration in the Constitution of certain rights shall not be construed to deny or disparage others retained by the people." And again in Amendment XIV: " . . . No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States."

What right could be more vital to the people than the right to safeguard themselves and their children against having the putrid discharge from the running sores of diseased animals put into their blood streams? The practice of vaccination is condemned as dangerous by the best medical scientists in the world. Then why should a man be persecuted because, having seen its effects, he refuses to have his children subjected to such a physical hazard in order to secure their admission to public school! Mr. Gardner, John Marsh's attorney, rightly raises the question, "Is it the child or the school that is public?" If vaccination protects those who are vaccinated, then they have nothing to fear from the unvaccinated.

Compulsory vaccination is a blot upon our American freedom and it must be banished from our land, that we may have "*LIBERTY AND JUSTICE FOR ALL*", the ideal upon which our nation was builded.

THEORY OF VACCINATION, INOCULATION, IMMUNIZATION AND NEGATIVE RESULTS

R. C. Hartong, Ph.C., D.C., Ph.C., F.R.C.

From his paper, "Chemical Aspects of Vaccination, Inoculation & Immunization"

The human body, as the result of many centuries of living and combating all the obstacles of primitive life and later, civilization, has developed a marvelous capacity to defend itself against what might be considered a hostile environment, and the errors of humanity.

A certain group of medical men have conceived of the idea of taking advantage of this natural capacity of the body to defend itself, by forcing it to develop special resistance to the expression of certain distressing symptoms associated with certain diseases.

The theory briefly was that if the body could be forced to develop this special resistance to certain diseases without actually contracting the disease in full force, that that should be a means of controlling, or at least mitigating, the disease. Thus far the theory was fine, but apparently their zeal for developing and expanding this practice caused them to rush into it without having a satisfactory knowledge of the chemistry or physiology involved. After years of exploiting these practices, they still know practically nothing about these essentials.

Speaking of immunity reactions, H. G. Wells, Ph.D., M.D., says:

"For the most part their chemical significance was less appreciated, largely because they were observed as reactions to bacteria, blood serum and cells, all of which are such complex mixtures of unknown constitution that any chemical consideration of their behavior is entirely impossible. Perhaps the hypothetical presentation of the subject in the terms of the Erlich nomenclature, with pictorial conceptions which had no chemical significance, had some influence in satisfying many investigators that they understood the principles when they merely understood the hypothesis."⁷

"As Dean has said in this connection, 'Ignorance, however aptly veiled in an attractive terminology, remains ignorance'. "⁸

"The critical reader will appreciate that the chemistry of immunology has so far had but a fragmentary and illogical development -- here, the work of an immunologist struggling with agents of unknown composition and measuring results with a yardstick of most uncertain accuracy; there, the efforts of a physical chemist applying methods of great accuracy to materials of uncertain nature and to reactions modified by an infinity of unknowable variables. No one can expect that, from data so derived, in a new science in which the contributions of tomorrow contradict many of those of yesterday, any clear picture or final statement can be presented."⁹

This same lack of specific knowledge prevails regarding the destructive action of these poisons upon the blood stream, lymph, lymph glands, kidneys, liver, heart, and particularly the nervous system.

7. Wells, H. Gideon, "The Chemical Aspects of Immunity", op. cit., p. 9

8. Ibid.

9. Ibid., p. 10

The natural body defense system is said to be cellular (*body cells*) and humoral (*body fluids*). The white blood corpuscles or leucocytes are the cellular defenders against foreign bodies which are not in solution, such as bacteria or small solid particles, which may gain access into the body.

The humoral defense depends upon substances in solution in the body fluids (*blood and lymph*); they are produced by secretory processes of the body cells. They have the capacity of neutralizing fluid poisons which may develop within the body, or that may gain entrance into the body as the result of damage to the protective tissues (*skin and mucous membranes*). These natural defenders of the body have the same capacity as the theoretical antibodies, which are supposed to be produced when certain toxins or antitoxins are injected into the body. Any substance which causes the body to develop antibodies is given the name antigen. The antibodies have been classified according to the nature of the physical behavior of the blood when certain antigens are injected into it. Foreign cells within the body are usually disposed of by agglutination (*clumping*), and are called agglutinins, or they may be dissolved, in this case they are called lysins. Foreign proteins which exist in solution are usually precipitated (*taken out of solution*); in this case, they are called precipitins. In each case nature's efforts are to render the foreign cells or substance as harmless as possible to the body. When the antibody is the result of the injection of a toxin into the body, it is called an antitoxin.

"The epithelium of cutaneous, alimentary, and probably also placental surfaces is an almost perfect barrier to the penetration of foreign proteins, as illustrated by the fact that such foreign proteins as those of toxic snake venom are harmless when taken into the alimentary canal."¹⁰

Speaking of foreign cells being engulfed or devoured by white corpuscles within the living body, "it seems probable that they must be first killed -- they form no exception to the rule that living protoplasm cannot be digested."¹¹ In other words living protoplasm is not food for one-celled organisms including *disease germs*.

Paul Erlich, the German scientist, 1854 - 1915, developed a theory as to how antigens, injected into the blood stream, caused the cells to form antibodies. His theory, briefly, was that the presence of an antigen or toxin in the living blood stream causes the protoplasm of the cell to produce an excess of side chain compounds. These compounds have the specific properties necessary to combine with the certain toxin present, and to form a compound incapable of destroying the living tissues of the body, and incapable of producing the symptoms of the disease associated with the toxin.

Erlich's theory did not reckon how much destruction might occur to the body tissues before all of the injected toxin was completely neutralized by the action of the cells. He did not give a workable formula as to how much toxin was necessary in any given case to form a sufficient quantity of antitoxin to prevent the development of a given disease and not leave an excess of toxin in the blood stream. He did not measure the shock to the nervous system or the weakening action upon the cells (which develop the antibodies) to the degree that other forms of disease might develop.

10. Ibid., pp. 26-27

11. Ibid., p. 263

The question of contamination of toxins or antiserums taken from diseased animals should also be considered. It is quite possible that the animals used for the propagation of toxins or antiserums may have hidden diseases such as cancer, or various other constitutional diseases in a more or less dormant state.

Since antibodies have not been isolated, per se, they are bound to be contaminated with many unknown substances which abound in the plasma or liquid portion of the blood stream. When we consider that every physical, mental, and spiritual quality of the parents are transmitted to their offspring, through the medium of the blood stream, it is not very gratifying to realize that our blood streams are polluted with the blood of diseased animals.

If we value the teachings of the Christian Bible which says, "That whatsoever ye shall sow, also shall ye reap,"¹² should we not wonder what manner of diseases we shall reap when we deliberately sow disease into the blood stream?

The following paragraph is taken from *Textbook of Physiology* by Professor Zoethout, professor of Physiology in Loyola University, Chicago. He is recognized as an authority on Physiology; therefore, a careful analysis of the anaphylactic phase of vaccination, inoculation, and immunization should be made, in view of its death-dealing power.

"Anaphylaxis -- the injection of a single dose of horse serum into a rabbit may have no ill results. But if a week or two later the rabbit receives another injection, grave results and even death may follow. This great increase in the susceptibility to what otherwise may be regarded as a harmless substance is known as anaphylaxis. . . . The foreign substance calling forth the anaphylaxis is of a protein nature. The profound disturbances following the second injection are sometimes spoken of as anaphylactic shock (*low blood pressure, heart and respiratory failure*). Such shock has been observed in the use of antitoxins. The cause of the shock is obscure; it seems as if the rapid formation of toxins after the second injection may be responsible. The anaphylaxis reaction is specific."¹³

The second injection of a horse serum which, "otherwise may be regarded as a harmless substance", into the rabbit, causing "grave results and even death may follow", should not concern us so much, but when it is admitted that antitoxins produce the same results in humans, we should know something about this inoculating-immunizing business which is being forced upon us by man-made laws. Those who depend upon such procedure to control (?) disease admit that "the cause of the shock is obscure." They also admit that "a rapid formation of toxins after the second injection" may be responsible.

It is quite evident that the first injection of antitoxin must have had a very serious effect upon the human body; otherwise, the second injection "regarded as a harmless substance", given several weeks later, should have very little more effect than the first injection.

It is admitted without qualification that "rapid formation of toxins after the second injection" of antitoxin may be responsible for the death shock. This is equivalent to saying that the injection of antitoxin into the human body causes the formation of toxins to the extent that they may cause death. When

12. Bible. Gal. Chap. 6, Verse 7.

13. Zoethout, "A Textbook of Physiology", op. cit., p. 161.

the doctors who administer these toxins, antitoxins, and anti-serums admit that the cause of the death shock is obscure, the subjects who are expected to take these injections should have the right to reject this kind of protective (?) medicine in favor of a system of disease-prevention based upon natural methods of building health and maintaining hygiene, both outside of the body and within the living blood stream. Toxin means poison, but the idea has been given to the public that antitoxin is not poison, but against poison, and that the antitoxin produced in the blood stream is the thing which is supposed to protect the body from disease.

This brings us back to the old idea of fighting poison with poison. The foregoing facts show how dangerous this old idea is to the welfare and life of our people. It is a known fact that nature is always making an effort to free the body from poison. Poisons within the body inhibit the natural functions of the body. They weaken and destroy the tissues and organs, thus lowering the natural resistance (*potential life force*) of the body to destructive environment of all kinds. For this reason when poisons are forced into the blood stream either by vaccination, by scab, or injections (*shots*), hypodermically, or any other means of inoculation, nature makes a supreme effort to throw off these poisons through the various channels of elimination (*kidneys, skin, lungs, and bowels*). This is a terrific shock to the body, particularly the nervous system. It also consumes considerable of the body's life force or potential energy. In the event that there are vital organs in the body which are already weakened or damaged due to previous disease, these toxins may cause failure of such vital organs, resulting in death.

Negative Results of Vaccination, Inoculation, and Immunization: Speransky gives a very definite reason why most anti-serum and antitoxin inoculations fail to prevent disease. These substances when injected into the body fluids fail to penetrate to any degree into the cerebro-spinal fluid and into the medulla of the brain. In other words the most vulnerable and vital portion of the body is left unprotected.

"I shall not dwell on this any longer, since we are only interested in the fact, firmly established long ago, that, as a rule, antibodies of specific sera either do not pass at all from the blood into the medulla, or penetrate into the latter only in a very small quantity -- for instance, when their concentration in the blood reaches a high level."¹⁴

Reporting on rabies, "To sum up, the question of the prophylactic and curative action of anti-rabic serum in all methods of infection has received a negative decision."¹⁵

In other words a vast amount of research and experiment has proven that serum treatment for rabies is no good. In regard to meningitis, tests show that anti-meningococcus serum has a specific effect on rabbits having the disease induced into them, but quoting Speransky, "these facts, however, only make it more incomprehensible why the same serum, employed in enormous doses, proves to be useless in spontaneous meningitis of human beings, in spite of the fact that it is injected directly into the region affected."¹⁶

14. Speransky, A. D., "A Basis for the Theory of Medicine", op. cit., p. 132.

15. Ibid., p. 133.

16. Ibid., p. 312.

"What has been said does not put meningitis, cholera, or cholera-like diseases in a special, isolated position. We have no doubt, for instance, that infection plays an even smaller role in the epidemiology of grippe. It is not surprising that in this strange infection there are no signs of immunity, and relapse is possible even within a few days after recovery. It is precisely inclination to relapses that characterizes processes of a neuro-dystrophic type and it is precisely in such processes that this phenomenon is entirely comprehensible. Cases of family grippe are easily explained by the uniformity of constitution and similarity of conditions of life and environment. Finally the epidemiology of grippe includes forms of its spreading which are incompatible with the idea of infection. Thus, in one year, grippe starting from Berlin spreads for some reason to Paris, while in the following year it changes its direction by 180° and from Berlin it moves to Moscow. The theory of infection does not answer these questions, consequently the solution must be sought in other spheres."¹⁷

"The infectional process obtains its definite form and cyclical course as a result of the constancy of the nerve mechanism underlying it."¹⁸

Speaking of the widespread danger involved in inoculating school children for tests of certain diseases, he quotes:

"Consequently, the clinic, and especially the children's clinic, should accurately estimate the real need for skin tests and all sorts of inoculations, and become quite clear as to the reality of their harmlessness; otherwise, the so-called "achievements of science" may easily be converted into one of the methods of *crippling humanity*."¹⁹

"Even the interpretation itself of the results of mass inoculations is strangely contradictory and ambiguous. One frequently reads or hears that even if active immunization does not lower the percentage of cases of disease among those inoculated, still it alleviates the form and course of the process. Supposing this to be true, where does specific immunity come in? The form of the given pathological process may be light or severe, but, *once it has begun, this means there is no immunity*."²⁰

"The abdominal typhus clinic, more often than any other, is confronted with relapses *beginning almost immediately after the recovery; in these relapses the syndrome repeats the whole cycle of the disease just terminated*. If the recovery was due solely to the development of specific immunity (as is generally accepted), then why such a sudden loss of this immunity?"²¹

"If, even in the exceptional conditions of immunization created by overcoming the disease, there is no guarantee against immediate heavy relapses, then it is clear that the severity of the process is not connected with so-called immunity reactions, and that *the effect of inoculations mentioned above does not depend upon specific antibodies alone*. The repeated action of the specific agent in small doses trains the nervous system in increasing its resistance to the given form of irritation and perhaps also to a number of other irritations of a similar kind."²²

17. Ibid., p. 315

18. Ibid., p. 316

19. Ibid., p. 324

20. Ibid.

21. Ibid.

22. Ibid., p. 325

"As previously shown, in the experiments of my collaborators A. T. Dolinskaya and D. S. Chetvertak, we obtained an isolated affection of the kidney by staphylococcus in the form of so-called carbuncle; but the cause of the process was a drop of formalin introduced into the ovary three weeks beforehand. *Luckily for our analysis, we knew about this*; if the same experiment had been performed by nature, the deceptive obviousness would have made us regard precisely the staphylococcus as the cause of all the symptoms."²³

In the above case of the drop of formalin causing a neuro-dystrophic disturbance resulting in kidney infection, it should be noted that formalin is considered a powerful disinfectant and consequently should be opposed directly to the formation of toxin or virus or the activity of any bacteria.

"There is absolutely no doubt that such facts are widely encountered in the human clinic. A disease gets its name not from the cause, but from one of the numerous consequences."²⁴

23. Ibid., p. 310

24. Ibid.

A NORMAL BODY THE GREATEST PROTECTION AGAINST DISEASE

THE LATE THOMAS A. EDISON said: "The doctor of the future will give no medicine, but will interest his patients *in the care of the human frame . . . and in the cause and prevention of disease.*

(Ed. Note: Vaccination and inoculation are, in the true sense, medicine.)

ALEXIS CARRELL, a well-known contemporary authority on health and the philosophy of living, says ". . . The future discoverer of a method for inducing tissues and organs to develop harmoniously . . . will present man with the most precious of all gifts, with an almost divine offering, the aptitude for happiness . . ."

And again, *DR. CARRELL*: "Injections of specific vaccine or serum for each disease, repeated medical examinations of the whole population, construction of gigantic hospitals, are expensive and *not very effective* means of preventing diseases and of developing a nation's health. *Good health should be natural.*"

The utterances of these great men are profound truth. Man for centuries has striven vainly to find the secret of good health; for without health, no matter what glory or wealth he may attain otherwise, he cannot enjoy the true happiness of abundant living. But man has been misled in his search onto devious roads. He has sought healing power in witchcraft and potions, in amulets and charms, in fire and bleeding, in self-torture and sacrifice. More recently he has turned to herbs and chemicals -- experimenting with every product from within the earth to every known element on the earth's surface, whether it be mineral, animal or vegetable life.

And still, man gropes blindly in his search, lost in a dark sea of "allergies", "reactions", "contagious", "heredity" diseases, "incurable" pathologies, "glandular deficiencies", and "new and mystifying" acute ailments.

Does it not seem reasonable and purely logic that, whatever the exciting cause of disease may be, the real *CAUSE*, the underlying *WEAKNESS* lies in *MAN'S BODY ITSELF*? Can he hope to correct this underlying weakness by the administration of chemicals -- by injections and doses, pills and inoculations? To date, the method has proven futile, even in behalf of its own practitioners, and it will go on being so, no matter what new chemical devices are compounded. For the very theory is illogical: It is the *treatment of symptoms* rather than a *correction of the cause* of illness.

There is but one true means to health. *A NORMAL BODY*. And when we use that term, we employ its all-inclusiveness. We mean that man's framework, the bony skeleton and especially the spine, must be straight and strong; we mean that the muscles attached thereto must be normal in tone, free from strain or atony; we mean that the delicate system

of nerves throughout the body must be free and uninhibited; that the flow of blood through the arteries and veins, to and from the heart, must be free and regular; that each organ perform its designated function without over-stimulation or inhibition; and that each gland, small or large, pour out its secretion in the proper controlling amount.

All students and practitioners of natural health methods know that, for the ideal normal to exist in a human body, the framework and spine must be normal, from foundation to its uppermost limit. Only then can the attached tissues and dependent organs be normal in tone; only then can the nerves which pass out through the spinal column, from the spinal cord to all tissues and organs of the body, be free and uninhibited, the flow of blood rhythmic and natural. And when these normal conditions preside, all other organs and tissues of the body perform normally and *NATURALLY*. Organs and tissue cannot become diseased when they are properly fed, when their waste products are properly carried away, when their nerve supply is normal, and when they are allowed to rest in their designed and proper positions. The sum total of their function will then be *HEALTH*.

But what, the reader may ask, would happen if disease invaded the body from outside? Are we not told daily of the millions of germs pervading the air, the soil, the very food and water we drink? What of them?

And we ask in turn, "*What of them?*" Does it not occur to the thinking individual that these same germs are present in *all* the air, *all* the soil, and in like amounts in the food and drink consumed by *all* the people in any general or circumscribed area at one time? -- And that in spite of this, only a few are ever "infected"? What makes some few ill, while the others, under identical living conditions, go happily about their way in abundant health?

Readers, *IT IS THE DIFFERENCE IN THE BODY OF THE INDIVIDUAL HIMSELF!*

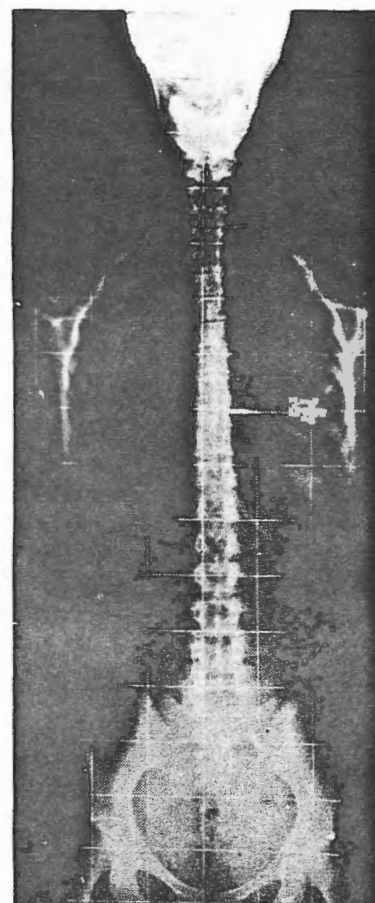
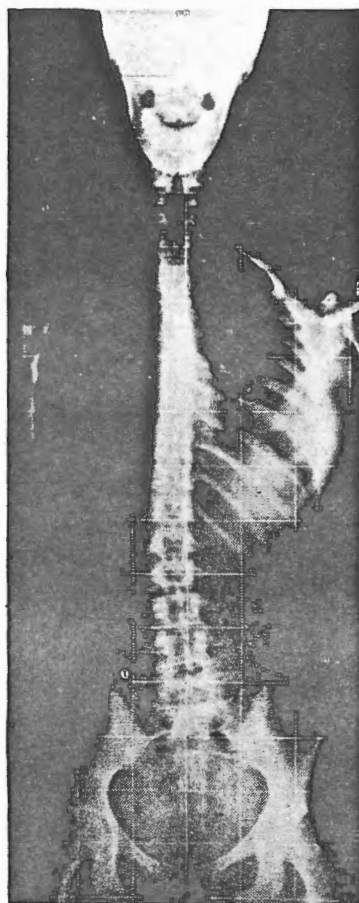
It has long been a question, and is now regarded by some authorities as a proven fact, that "disease germs" cannot live or reproduce on healthy tissue, that their only habitable medium within the living body is sub-normal or partially dead tissue. The very promoters of the germ theory of disease admit this perforce, when they state that the best "culture medium" for many germs is *stale* meat broth, allowed to stand from days to weeks before it can be used effectively; when they employ *fermented* urine and other substances rather than the fresh specimen; when the main base of many culture media is agar, a gelatinous, partially cellulose carbohydrate that is foreign to the body and in fact undigestible by the human, when in practically all cases, chemicals must be added to the culture media to promote germ growth, some to acidify, some to alkalinize, others to "sensitize" the media. *In no case is normal animal tissue, blood, or urine used.*

Even in the preparation of vaccines, not *one*, but many and repeated injections of the virus (the living, virulent disease-poison) must be made into the animal in many cases, in order to obtain a "properly virulent" product for human vaccination or inoculation.

BEFORE AND AFTER
X-RAYS
OF MRS. J. T. MORGAN

Before Basic Technique
Chiropractic -- a dis-
torted spine and body
framework. Symptoms:
chronic appendicitis,
colds, constipation,
indigestion, menstrual
disturbances, general
toxicity. (On left)

After Basic Technique
Chiropractic -- an al-
most perfect spine and
body framework. Symp-
toms entirely eliminat-
ed. (On right)



AT LEFT: Mrs. Morgan
as she appears today,
a picture of health
and vitality.

Health is the greatest
possession in the world
and was intended for
all persons to enjoy
freely and abundantly.

(See story, following
page)

Does it not seem that man is being led in circles, through a maze of *SCIENTIFIC ERRORS*, the outgrowth of blind greed, sired by ignorance? If we continue seeking health through ignorance, superstition, and error, we cannot hope for a more merciful end product than a human race of weakened, degenerate, over-sensitized bodies.

Dear readers, our Creator was not wrong. He does not ask that we remove organs, replace them, drug them, or *give them disease to prevent disease*. He asks only that we *keep* the body in the normal condition he made for it. Given that, plus natural living habits, the body will repair and keep *itself* well.

As one illustration of the marvelous recuperative and protective powers that lie within the body itself when the body structure is truly normal, we are including here a photograph of a young woman, Francis (Mrs. J. T.) Morgan of Joplin, Missouri.

Also shown are what we term Mrs. Morgan's "before and after" X-rays, of the full spine and pelvis.

This young woman suffered recurrent attacks of appendicitis, frequent colds, severe constipation, indigestion, acute menstrual disturbances, and a general toxicity and listlessness, when the first X-ray was taken. The astute reader will realize that the cause for these many and varied ailments lay in the dis-arranged spinal column and body framework. Notice the curvature in the lower portion of the spine, sufficient to throw the entire body mechanics out of proper function, to make the muscles tight and strained, to disturb the delicate nervous system.

But young Mrs. Morgan did not submit to an appendix operation; she did not seek relief through "cold shots", nor did she use medicines or drugs to dull the symptoms of indigestion, menstrual pain, and toxicity. *SHE SAW A CHIROPRACTOR* -- one who was capable of straightening her spine and body and removing the *CAUSE* of her ailments. She was sensible enough to not be satisfied with having her *SYMPTOMS TREATED*.

The result is that today she fairly "bubbles over" with vitality; the attacks of appendicitis have disappeared, her elimination and menstruation are entirely normal, and she seldom if ever has a "cold". The improvement in her spine and body framework are plainly demonstrated in the second X-ray.

Mrs. Morgan's case is not unusual, or a miracle. Here is simply an illustration of hundreds, yes, thousands, of cases who today find natural, abundant health through *NATURAL* means.

When the body framework is wholly normal, there is never the slightest need or excuse for inflicting upon the body any poison claimed to be a preventative.

This one simple, fundamental truth stands out from the sea of darkness as a bright, clear light for all who would seek perfect health.

--Dr. Hugh B. Logan, Originator and Developer
of that body-structure corrective method
known as Logan Basic Technique.